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June 09, 2010

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:



BOARD OF SUPERVISORS

Gloria Molina First District Mark Ridley-Thomas Second District Zev Yaroslavsky Third District Don Knabe Fourth District Michael D. Antonovich Fifth District

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

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JUNE 15, 2010

SACHI A. HAMAI EXECUTIVE OFFICER

APPROVAL OF ALCOHOL AND DRUG SERVICES RENEWAL AGREEMENTS
AND ACCEPTANCE OF A COMBINED NEGOTIATED NET AMOUNT AND DRUG/MEDI-CAL
AGREEMENT
(ALL SUPERVISORIAL DISTRICTS)
(3 VOTES)

SUBJECT

Approval to execute 231 renewal agreements for the provision of various alcohol and drug prevention, intervention, treatment and recovery services throughout Los Angeles County; accept a Combined Negotiated Net Amount and Drug/Medi-Cal Agreement with the State Department of Alcohol and Drug Programs for alcohol and drug prevention and treatment programs within Los Angeles County; and adjust contract reimbursement rates and contract funding, as necessary.

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Approve and instruct the Director of the Department of Public Health (DPH), or his designee, to renew 47 alcohol and drug services agreements with the agencies listed in Attachment A, to provide services to California Work Opportunities and Responsibility to Kids (CalWORKs) recipients and Welfare-to-Work (WtW) participants, effective July 1, 2010 through, June 30, 2011, at a total maximum obligation of \$9,885,062; 100 percent offset by Intra-Fund Transfer (IFT) monies, subject to the availability of funds, as described under a Memorandum of Understanding (MOU) between DPH and the Department of Public Social Services (DPSS).
- 2. Approve and instruct the Director of DPH, or his designee, to execute 14 alcohol and drug services renewal agreements with the agencies listed in Attachment B, to provide services to Department of Children and Family Services (DCFS) clients, effective July 1, 2010 through June 30,

- 2011, at a maximum annual obligation of \$2,503,668; 100 percent offset by IFT monies. In addition, delegate authority to the Director, or his designee, to extend the agreements for an additional twelve months through June 30, 2012, to allow for the completion of a competitive selection process, at a maximum annual obligation of \$2,503,668; 100 percent offset by IFT monies, subject to the availability of funds, as described under a MOU between DPH and DCFS.
- 3. Approve and instruct the Director of DPH, or his designee, to execute 59 alcohol and drug services renewal agreements with the agencies listed in Attachment C, to provide services to General Relief (GR) recipients, effective July 1, 2010 through June 30, 2011, at a maximum annual obligation of \$6,495,695 offset by IFT and net County Cost (NCC) monies. In addition, delegate authority to the Director, or his authorized designee, to extend the agreements for an additional twelve months through June 30, 2012, to allow for the completion of a competitive selection process, at a maximum annual obligation of \$6,495,695 offset by IFT and NCC monies, subject to the availability of funds, as described under a MOU between DPH and DPSS. The NCC monies (\$1,000,000) are provided annually from the Third Supervisorial District for the purpose of providing methamphetamine treatment services.
- 4. Approve and instruct the Director of DPH, or his designee, to execute four alcohol and drug services renewal agreements with the agencies listed in Attachment D, to provide services to Family Dependency Drug Court (FDDC) clients, effective July 1, 2010 through June 30, 2011, at a maximum annual obligation of \$893,617; 100 percent offset by a Comprehensive Drug Court Implementation Dependency Drug Court State Grant. In addition, delegate authority to the Director, or his authorized designee, to extend the agreements for an additional twelve months through June 30, 2012, to allow for the completion of a competitive selection process, at a maximum annual obligation of \$893,617; 100 percent offset by a Comprehensive Drug Court Implementation Dependency Drug Court State Grant, subject to the availability of funds.
- 5. Authorize and instruct the Director of DPH, or his designee, to sign the attached Combined Negotiated Net Amount (NNA) and Drug/Medi-Cal (D/MC) Agreement with the State Department of Alcohol and Drug Programs (SDADP), Exhibit I, to support the continued provision of alcohol and drug prevention and treatment services within Los Angeles County (County), effective July 1, 2010 through June 30, 2013, for \$418,054,209.
- 6. Delegate authority to the Director of DPH, or his designee, to accept and execute future amendments to the Combined NNA and D/MC Agreement to roll over any unused funds as allowed; or to increase or decrease the State allocation by no more than 25 percent, as directed by the State, subject to review and approval by County Counsel and the Chief Executive Office (CEO), and notification to your Board.
- 7. Approve and instruct the Director of DPH, or his designee, to execute 45 alcohol and drug services renewal agreements with the agencies listed in Attachment E, to provide general program services, effective July 1, 2010 through June 30, 2011, at a maximum annual obligation of \$19,731,728 offset by federal, State, Special Fund, IFT monies, and NCC. In addition, delegate authority to the Director, or his authorized designee, to extend the agreements for an additional twelve months through June 30, 2012, to allow for the completion of a competitive selection process, at a maximum annual obligation of \$19,731,728 offset by federal, State, Special Fund, IFT monies, and NCC, subject to the availability of funds.
- 8. Approve and instruct the Director of DPH, or his designee, to execute 54 alcohol and drug services renewal agreements with the agencies listed in Attachment F, to provide prevention

program services, effective July 1, 2010 through June 30, 2011, at a total maximum obligation of \$10,508,511; 100 percent offset by monies from federal and Special Funds monies, subject to the availability of funds.

- 9. Approve and instruct the Director of DPH, or his designee, to execute six alcohol and drug services renewal agreements with the agencies listed in Attachment G, to provide services to Parolee Services Network (PSN) clients, effective July 1, 2010 through June 30, 2011, at a total maximum obligation of \$1,333,164; 100 percent offset by State monies, subject to the availability of funds.
- 10. Approve and instruct the Director of DPH, or his designee, to execute one alcohol and drug services renewal agreement with the Regents of the University of California, Los Angeles, Attachment H, to provide evaluation services, effective July 1, 2010 through June 30, 2011, at a total maximum obligation of \$924,041; 100 percent offset by federal Substance Abuse Prevention and Treatment (SAPT) Block Grant funds, State, and IFT monies, subject to the availability of funds.
- 11. Approve and instruct the Director of DPH, or his designee, to execute one drug testing services renewal agreement with the Laboratory Corporation of America, Attachment I, to provide drug testing services, effective July 1, 2010 through June 30, 2011, at a total maximum obligation of \$2,000,000; 100 percent offset by federal monies, subject to availability of funds.
- 12. Delegate authority to the Director of DPH, or his designee, to; a) rollover any unspent grant funds identified in Exhibit I; and b) increase or decrease contractors funding (identified in Attachments A through I) by no more than 25 percent of each year's maximum obligation, subject to review and approval by County Counsel and the CEO, and notification to your Board.
- 13. Delegate authority to the Director of DPH, or his designee, to adjust once a year each Contractor's fee-for-service reimbursement rate(s) herein up to 15 percent of the existing rate. Adjustments to the reimbursement rate will be determined based on the review of each Contractor's budget and cost report.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

For several years, your Board has approved various alcohol and drug services agreements to provide services to CalWORKS and GR recipients, WtW participants, DCFS clients, parolees, and individuals who are required by court order to participate in court mandated drug treatment programs.

Board approval of the recommended actions contained in this letter will: 1) allow DPH's Substance Abuse Prevention and Control (SAPC) to accept the Combined NNA and D/MC Agreement with SDADP for a total amount of \$418,054,209 to support the continuation of alcohol and drug services; 2) extend existing agreements for one or two-year periods to continue providing various alcohol and drug services for prevention, intervention, education to those at risk for substance abuse, referral, and treatment and recovery services for children, youth, men, and women who have alcohol and/or drug problems for FYs 2010-12; and 3) allow DPH to adjust the contract reimbursement rates, based on a review of the contractor's proposed revised budget and cost report. Such a review will determine whether contractor's cost to provide these services justify a rate adjustment.

On June 16, 2009, your Board approved the current CalWORKs alcohol and drug services

agreements effective July 1, 2009 through June 30, 2010. Most recently on April 27, 2010, your Board approved amendments to the CalWORKs agreements in order for DPH to comply with MOU requirements. At that time, DPH informed your Board that it would return in June 2010 to request for a renewal of these agreements.

Board approval of the Combined NNA and D/MC Agreement is required by the SDADP, and will comply with Health and Safety Code, Section 11758.46(g)(2), which requires that contracts for counties that provide D/MC reimbursable services be executed by June 30th of each fiscal year. DPH SAPC received the Combined NNA and D/MC Agreement from the State on April 14, 2010. Because the combined contract includes budgets for both NNA and D/MC-funded services, the deadline date applies to both portions of the contract. Thus, SDADP requires the FY 2010-13 Combined NNA and D/MC Agreement be approved by the Board and returned for full execution by June 15, 2010. If the deadline is not met, SAPC will not be eligible for the Combined NNA and D/MC funds.

Implementation of Strategic Plan Goals

These actions support Goal 1, Operational Effectiveness, Goal 2, Children, Family and Adult Well-Being and Goal 4, Health and Mental Health, of the County's Strategic Plan to continue to provide alcohol and drug prevention and treatment services within County.

FISCAL IMPACT/FINANCING

The cost of the recommended agreements for FY 2010-11 is \$54,275,486 which will fund 231 agreements and for FY 2011-12, is \$29,624,708 which will fund 122 agreements.

The Combined NNA and D/MC Agreement provides federal Block Grant and State General Funds to support alcohol and drug program services in the County and has a three-year term, effective July 1, 2010 through June 30, 2013. The State's maximum obligation for each FY term is \$139,351,403, respectively, and the total maximum obligation to the County for the Combined NNA and D/MC Agreement is \$418,054,209.

The NCC funding identified in Recommendation Number 3 is not provided for the GR program. This funding is applied to a GR provider, National Council on Alcoholism and Drug Dependence of the San Fernando Valley, Inc., from the Third Supervisorial District for the purpose of providing methamphetamine treatment services. There is no other NCC cost.

Funding has been requested in DPH's FY 2010-11 Proposed Budget and will be requested in future years, as necessary.

Attachment J is a complete funding summary of the 231 renewal agreements.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

All agencies recommended for a renewal agreement are in compliance with federal and State laws and regulations for substance abuse services and current contractual requirements. The recommended agreement formats will be reviewed and approved as to use by County Counsel prior to distribution to the awarded agencies.

SAPC has been working with both DCFS and DPSS in drafting the contract exhibit formats and solicitations. There are no programmatic changes to the formats and there will be no material service changes in the solicitations.

For several years, your Board has accepted funding from the State to provide support for the provision of alcohol and drug services with the County.

The Combined NNA and D/MC Agreement, effective July 1, 2010 through June 30, 2013, represents a three-year commitment by SDADP to provide funding support for the provision of alcohol and drug services to the County.

Exhibit I has been approved as to form by County Counsel.

Attachment K is a listing of the Executive Directors of the recommended agencies.

CONTRACTING PROCESS

On June 16, 2009, your Board instructed SAPC that no contracts with any provider should be renewed for more than one year until DPH, working with CEO, provides a status report to your Board on its efforts to create a fair and competitive Request for Proposals process for all alcohol and drug treatment contracts.

On February 26, 2010, DPH SAPC notified your Board that included a timeline of the Request for Proposal projects. SAPC intends to complete competitive solicitations for the Board to award new CalWORKs and prevention services agreements by approximately June 2011. A separate memo and chart of expected completion dates for all the competitive solicitations was provided to your Board on April 14, 2010.

IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended actions will allow DPH to ensure that alcohol and drug services will continue without interruption throughout the County.

Respectfully submitted,

JONATHAN E. FIELDING, M.D., M.P.H.

Director and Health Officer

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Enclosures

c: Chief Executive Officer County Counsel Executive Officer, Board of Supervisors

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	•	Subtype	Modality	009-2010 Funding	osed 2010- Funding	Variance
1	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000657A	CalWORKs	OC (CW)	\$ 18,880	\$ 18,889	\$9
2	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000753A	CalWORKs	DCH (CALWORKS)	\$ 681,731	\$ 682,066	\$335
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000753B	CalWORKs	RS (CALWORKS)	\$ 28,892	\$ 28,906	\$14
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000753C	CalWORKs	OC (CW)	\$ 57,157	\$ 57,185	\$28
						\$ 767,780	\$ 768,157	\$377
3	AVALON-CARVER COMMUNITY CENTER	2	PH-000650A	CalWORKs	OC (CW)	\$ 26,422	\$ 26,435	\$13
4	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000385A	CalWORKs	OC (CW)	\$ 75,000	\$ 75,037	\$37
•	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000649A	CalWORKs	RS (CALWORKS)	\$ 90,400	\$ 90,444	\$44
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000649B	CalWORKs	RS (CALWORKS)	\$ 426,120	\$ 426,329	\$209
						\$ 591,520	\$ 591,810	\$290
5	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000711A	CalWORKs	OC (CW)	\$ 25,171	\$ 25,183	\$12
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000711B	CalWORKs	OC (CW)	\$ 15,517	\$ 15,525	\$8
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000711C	CalWORKs	OC (CW)	\$ 14,505	\$ 14,512	\$7
						\$ 55,193	\$ 55,220	\$27
6	CAMBODIAN ASSOCIATION OF AMERICA	4	PH-000867A	CalWORKs	OC (CW)	\$ 136,987	\$ 137,054	\$67
7	CASA DE HERMANDAD, INC.	2	PH-000837A	CalWORKs	OC (CW)	\$ 10,367	\$ 10,372	\$5
8	CASA DE LAS AMIGAS	5	PH-000664A	CalWORKs	RS (CALWORKS)	\$ 36,321	\$ 36,339	\$18
	CHILDREN'S INSTITUTE, INC.*		PH-000952A	CalWORKs	OC (CW)	\$ 4,850	\$ -	-\$4,850
9	CITY OF COMPTON	2	PH-000906A	CalWORKs	OC (CW)	\$ 786	\$ 786	\$0
10	CITY OF PASADENA L:\TEAM A\Esther\#01432.Renewals.FY10-11\Final Bd.Ltr\Final BL attachments\Attachment A		PH-000941A 1 of 5	CalWORKs	OC (CW)	\$ 15,225	\$ 15,232 5/19/2010	\$7

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality		09-2010 unding	Prop	oosed 2010- Funding	Variance
11	CLINICA MONSENOR OSCAR A. ROMERO	1	PH-000656A	CalWORKs	OC (CW)	\$	15,863	\$	15,871	\$8
12	CRI-HELP, INC.	1	PH-000652A	CalWORKs	RS (CALWORKS)	\$	8,753	\$	8,757	\$4
13	DIDI HIRSCH PSYCHIATRIC SERVICE	3	PH-000665A	CalWORKs	RS (CALWORKS)	\$	174,857	\$	174,943	\$86
14	DO IT NOW FOUNDATION	3	PH-000729A	CalWORKs	OC (CW)	\$	12,355	\$	12,361	\$6
15	EL PROYECTO DEL BARRIO	3	PH-000927A	CalWORKs	DCH (CALWORKS)	\$	22,930	\$	22,941	\$11
	EL PROYECTO DEL BARRIO	3	PH-000927B	CalWORKs	OC (CW)	\$ \$	21,716 44,646		21,727 44,668	\$11 \$22
16	HIS SHELTERING ARMS, INC.	2	PH-000794A	CalWORKs	OC (CW)	\$	25,503	\$	25,516	\$13
	HIS SHELTERING ARMS, INC.	2	PH-000794B	CalWORKs	RS (CALWORKS)	\$	66,054		66,086	\$32
						\$	91,557	\$	91,602	\$45
17	HOMELESS HEALTH CARE LOS ANGELES, INC.	1	PH-000760A	CalWORKs	OC (CW)	\$	17,846	\$	17,855	\$9
18	I-ADARP, INC.	3	PH-000642A	CalWORKs	OC (CW)	\$	27,946	\$	27,960	\$14
19	JOINT EFFORTS, INC.	4	PH-000942A	CalWORKs	OC (CW)	\$	11,761	\$	11,767	\$6
20	LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000819A	CalWORKs	OC (CW)	\$	145,272	\$	145,343	\$71
21	MARY LIND RECOVERY CENTERS	3	PH-000884A	CalWORKs	RS (CALWORKS)	\$	63,534	\$	63,565	\$31
22	MELA COUNSELING SERVICES CENTER, INC.	1	PH-000853A	CalWORKs	DCH (CALWORKS)	\$	51,210	\$	51,235	\$25
23	MID VALLEY RECOVERY SERVICES, INC.	1	PH-000655A	CalWORKs	OC (CW)	\$	18,813	\$	18,822	\$9
	MID VALLEY RECOVERY SERVICES, INC. L:\TEAM A\Esther\#01432.Renewals.FY10-11\Final Bd.Ltr\Final BL attachments\Attachment A	1	PH-000655B 2 of 5	CalWORKs	RS (CALWORKS)	\$	78,073	\$	78,111 5/19/2010	\$38

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality		009-2010 Funding		oosed 2010- Funding	Variance
	MID VALLEY RECOVERY SERVICES, INC.	1	PH-000655C	CalWORKs	OC (CW)	\$	47,550	\$	47,573	\$23
						\$	144,436	\$	144,506	\$70
24	MINI TWELVE STEP HOUSE, INC.	2	PH-000900A	CalWORKs	OC (CW)	\$	94,971	\$	95,018	\$47
	MINI TWELVE STEP HOUSE, INC.	2	PH-000900B	CalWORKs	RS (CALWORKS)	\$	10,421	\$	10,426	\$5
						\$	105,392	\$	105,444	\$52
25	MJB TRANSITIONAL RECOVERY, INC.	2	PH-001010A	CalWORKs	OC (CW)	\$	24,555	\$	24,567	\$12
	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH	1	PH-000901A	CalWORKs	DCH (CALWORKS)	\$	23,227	\$	23,238	\$11
26	AREA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH		PH-000901B	CalWORKs	,	\$	167,944		168,026	\$82
	AREA	4	РП-000901Б	Calworks	RS (CALWORKS)	\$ \$	191,171		191,264	\$93
	PEOPLE IN PROGRESS, INC.	1	PH-000846A	CalWORKs	OC (CW)	\$	44,958	¢	44,980	\$22
27	TEOLEE IN TROUBESS, INC.	1	111-000840A	Calworks	OC (CW)	Ψ	44,936	φ	44,700	\$22
28	PLAZA COMMUNITY CENTER	1	PH-000663A	CalWORKs	OC (CW)	\$	21,445	\$	21,456	\$11
	PLAZA COMMUNITY CENTER	1	PH-000663B	CalWORKs	DCH (CALWORKS)	\$	40,120	\$	40,140	\$20
						\$	61,565	\$	61,596	\$31
29	POMONA COMMUNITY CRISIS CENTER, INC.	1	PH-000864A	CalWORKs	OC (CW)	\$	25,238	\$	25,250	\$12
	PRINCIPLES NO	-	DII 0000744	C IWODY	DG (CALWODKG)	ф	17 402	ф	17.400	¢ο
30	PRINCIPLES, INC.	3	PH-000874A	CalWORKs	RS (CALWORKS)	\$	17,483	Þ	17,492	\$9
31	PROTOTYPES	1	PH-000394A	CalWORKs	OC (CW)	\$	75,000	\$	75,037	\$37
	PROTOTYPES	1	PH-000394C	CalWORKs	RS (CALWORKS)	\$	369,755	\$	369,936	\$181
	PROTOTYPES	1	PH-000394D	CalWORKs	DCH (CALWORKS)	\$	27,930	\$	27,944	\$14
						\$	472,685	\$	472,917	\$232
32	SALVATION ARMY, A CALIFORNIA CORPORATION	1	PH-000989A	CalWORKs	RS (CALWORKS)	\$	52,280	\$	52,306	\$26
33	SANTA ANITA FAMILY SERVICES L:\TEAM A\Esther\#01432.Renewals.FY10-11\Final Bd.Ltr\Final BL attachments\Attachment A	5	PH-000877A 3 of 5	CalWORKs	OC (CW)	\$	5,980	\$	5,983 5/19/2010	\$3

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	009-2010 Funding	posed 2010- Funding	Variance
	SANTA ANITA FAMILY SERVICES	5	PH-000877B	CalWORKs	OC (CW)	\$ 16,542	\$ 16,550	\$8
						\$ 22,522	\$ 22,533	\$11
34	SANTA MONICA BAY AREA DRUG ABUSE COUNCIL	3	PH-000835A	CalWORKs	OC (CW)	\$ 12,019	\$ 12,025	\$6
35	SHIELDS FOR FAMILIES, INC.	2	PH-000667A	CalWORKs	DCH (CALWORKS)	\$ 453,732	\$ 453,955	\$223
36	SOCIAL MODEL RECOVERY SYSTEMS, INC.	5	PH-000935A	CalWORKs	OC (CW)	\$ 49,016	\$ 49,040	\$24
37	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000758A	CalWORKs	RS (CALWORKS)	\$ 51,294	\$ 51,319	\$25
	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000758B	CalWORKs	OC (CW)	\$ 55,560	55,587	\$27
						\$ 106,854	\$ 106,906	\$52
38	SOUTH BAY HUMAN SERVICES COALITION	4	PH-000786A	CalWORKs	OC (CW)	\$ 19,573	\$ 19,583	\$10
39	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000672A	CalWORKs	OC (CW)	\$ 280,262	\$ 280,400	\$138
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000672B	CalWORKs	RS (CALWORKS)	\$ 495,351	495,594	\$243
						\$ 775,613	\$ 775,994	\$381
40	SPECIAL SERVICE FOR GROUPS	1	PH-000946A	CalWORKs	OC (CW)	\$ 123,742	\$ 123,803	\$61
41	STEPPING STONES HOME	5	PH-000789A	CalWORKs	RS (CALWORKS)	\$ 32,702	\$ 32,718	\$16
42	SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000674A	CalWORKs	OC (CW)	\$ 7,890	\$ 7,894	\$4
	SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000674B	CalWORKs	RS (CALWORKS)	\$ 148,975	\$ 149,048	\$73
						\$ 156,865	\$ 156,942	\$77
43	SUNRISE COMMUNITY COUNSELING CENTER	1	PH-000887A	CalWORKs	OC (CW)	\$ 884	\$ 884	\$0
44	TARZANA TREATMENT CENTER	4	PH-000919A	CalWORKs - Dual Diagnosis	RS (CW-DUAL DIAGNOSIS)	\$ 260,372	\$ 260,500	\$128
	TARZANA TREATMENT CENTER L:\TEAM A\Esther\#01432.Renewals.FY10-11\Final Bd.Ltr\Final BL attachments\Attachment A	4	PH-000919A 4 of 5	CalWORKs - General Population	RS (CW-GENERAL POPULATION)	\$ 209,093	\$ 209,196 5/19/2010	\$103

#	Agency	SUP	Contract #	Subtype	Modality		2009-2010 Funding		posed 2010- Funding	Variance
	TARZANA TREATMENT CENTER	5	PH-000919B	CalWORKs	OC (CW)	\$	717,546	\$	717,898	\$352
	TARZANA TREATMENT CENTER	3	PH-000919C	CalWORKs - Dual Diagnosis	RDTX (CALWORKS-DUAL DIAGNOSIS)	\$	235,587	\$	235,703	\$116
	TARZANA TREATMENT CENTER	3	PH-000919C	CalWORKs - General Population	RDTX (CALWORKS- GENERAL POPULATION)	\$	97,688	\$	97,736	\$48
	TARZANA TREATMENT CENTER	4 PH-000919D CalWORK		CalWORKs	DCH (CALWORKS)		743,984	\$	744,349	\$365
	TARZANA TREATMENT CENTER	4 PH-000919E CalWORKs		CalWORKs	DCH (CALWORKS)	\$	771,744	\$	772,123	\$379
	TARZANA TREATMENT CENTER	3	PH-000919F	CalWORKs - Dual Diagnosis	RS (CW-DUAL DIAGNOSIS)	\$	552,903	\$	553,174	\$271
	TARZANA TREATMENT CENTER	3	PH-000919F	CalWORKs - General Population	RS (CW-GENERAL POPULATION)		221,794	\$	221,903	\$109
	TARZANA TREATMENT CENTER	3	PH-000919G	CalWORKs OC (CW)		\$	693,942	\$	694,283	\$341
						\$	4,504,653	\$	4,506,865	\$2,212
45	URDC HUMAN SERVICES CORPORATION	5	PH-000798A	CalWORKs	DCH (CALWORKS)	\$	2,402	\$	2,403	\$1
	URDC HUMAN SERVICES CORPORATION	5	PH-000798B	CalWORKs	OC (CW)	\$	4,185	\$	4,187	\$2
						\$	6,587	\$	6,590	\$3
46	VALLEY WOMEN'S CENTER, INC.	5	PH-000673A	CalWORKs	OC (CW)	\$	117,756	\$	117,814	\$58
47	WATTS HEALTHCARE CORPORATION	2	PH-000739A	CalWORKs	RS (CALWORKS)	\$	32,851	\$	32,867	\$16
						\$	9,885,063	\$	9,885,062	-\$1

SUBSTANCE ABUSE PREVENTION AND CONTROL

Department of Children and Family Services Agreements

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Funding	Pro	posed 2010-11 Funding		Variance
1	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000751A	DCFS	ADRS (DCFS)	\$ 35,000	\$	31,821	\$	(3,179)
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000751B	DCFS	ADNRS (DCFS)	\$ 85,000	\$	77,279	\$	(7,721)
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000751C	DCFS	ADRS (DCFS)	\$ 135,000	\$	122,737	\$	(12,263)
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000751D	DCFS	ADNRS (DCFS)	\$ 59,000	\$	53,641	\$	(5,359)
						\$ 314,000	\$	285,478	\$	(28,522)
2	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000644A	CASC-DCFS	CASC-DCFS	\$ 97,725	\$	88,848	\$	(8,877)
3	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000709C	CASC-DCFS	CASC-DCFS	\$ 76,080	\$	69,169	\$	(6,911)
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000709A	DCFS	ADRS (DCFS)	\$ 49,230	\$	44,758	\$	(4,472)
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000709B	DCFS	ADNRS (DCFS)	\$ 45,000	\$	40,912	\$	(4,088)
						\$ 170,310	\$	154,839	\$	(15,471)
4	CRI-HELP, INC.	3	PH-000706A	DCFS	ADRS (DCFS)	\$ 44,000	\$	40,003	\$	(3,997)
	CRI-HELP, INC.	3	PH-000706B	DCFS	ADNRS (DCFS)	\$ 20,000	\$	18,183	\$	(1,817)
	CRI-HELP, INC.	1	PH-000706C	DCFS	ADRS (DCFS)	\$ 87,000	\$	79,097	\$	(7,903)
	CRI-HELP, INC.	1	PH-000706D	DCFS	ADNRS (DCFS)	\$ 37,000	\$	33,639	\$	(3,361)
						\$ 188,000	\$	170,922	\$	(17,078)
5	DIDI HIRSCH PSYCHIATRIC SERVICE	2	PH-000707A	CASC-DCFS	CASC-DCFS	\$ 28,102	\$	25,549	\$	(2,553)
6	HOMELESS HEALTH CARE LOS ANGELES, INC.	1	PH-000742A	CASC-DCFS	CASC-DCFS	\$ 31,158	\$	28,328	\$	(2,830)
7	PRINCIPLES, INC.	5	PH-000856A	DCFS	ADRS (DCFS)	\$ 137,000	\$	124,555	\$	(12,445)
	PRINCIPLES, INC.	5	PH-000856B	DCFS	ADNRS (DCFS)	\$ 56,000	\$	50,913	\$	(5,087)
						\$ 193,000	\$	175,468	\$	(17,532)
8	PROTOTYPES	1	PH-000398A	DCFS	ADRS (DCFS)	\$ 250,000	\$	227,290	\$	(22,710)
	L:\TEAM &\Esther\#01432 Renewals EV10-11\Final Rd Ltr\Final RL attachments\Attachment R		1 of 3					5/10	2/2010	n

Department of Children and Family Services Agreements

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Funding		posed 2010-11 Funding	V	/ariance
	PROTOTYPES	1	PH-000398B	DCFS	ADNRS (DCFS)	\$	84,630	\$ 76,942	\$	(7,688)
	PROTOTYPES	1	PH-000398C	CASC-DCFS	CASC-DCFS	\$	138,294	\$ 125,732	\$	(12,562)
						\$	472,924	\$ 429,964	\$	(42,960)
9	SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CENTER, INC.	3	PH-000741A	CASC-DCFS	CASC-DCFS	\$	42,512	\$ 38,650	\$	(3,862)
10	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000756A	DCFS	ADRS (DCFS)	\$	168,000	\$ 152,739	\$	(15,261)
	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000756B	DCFS	ADNRS (DCFS)	\$	75,000	\$ 68,187	\$	(6,813)
						\$	243,000	\$ 220,926	\$	(22,074)
11	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000700A	DCFS	ADRS (DCFS)	\$	107,000	\$ 97,280	\$	(9,720)
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000700B	DCFS	ADNRS (DCFS)	\$	46,000	\$ 41,821	\$	(4,179)
						\$	153,000	\$ 139,101	\$	(13,899)
12	2 SPECIAL SERVICE FOR GROUPS	2	PH-000934C	CASC-DCFS	CASC-DCFS	\$	119,604	\$ 108,739	\$	(10,865)
	SPECIAL SERVICE FOR GROUPS	2	PH-000934A	DCFS	ADRS (DCFS)	\$	150,960	\$ 137,247	\$	(13,713)
	SPECIAL SERVICE FOR GROUPS	2	PH-000934B	DCFS	ADNRS (DCFS)	\$	75,633	\$ 68,763	\$	(6,870)
						\$	346,197	\$ 314,749	\$	(31,448)
13	S SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000702A	DCFS	ADRS (DCFS)	\$	120,000	\$ 109,099	\$	(10,901)

Department of Children and Family Services Agreements

#		Agency	SUP	Contract #	Subtype	Modality	2009-2010 Funding				Modality		Pro	posed 2010-11 Funding	V	Variance
14	TARZANA TREATMENT CENTER		5	PH-000920F	CASC-DCFS	CASC-DCFS	\$	39,893	\$	36,269	\$	(3,624)				
	TARZANA TREATMENT CENTER		3	PH-000920A	DCFS	ADRS (DCFS)	\$	112,000	\$	101,826	\$	(10,174)				
	TARZANA TREATMENT CENTER		5	PH-000920B	DCFS	ADNRS (DCFS)	\$	48,000	\$	43,640	\$	(4,360)				
	TARZANA TREATMENT CENTER		3	PH-000920C	DCFS	ADRS (DCFS)	\$	75,000	\$	68,187	\$	(6,813)				
	TARZANA TREATMENT CENTER		3	PH-000920D	DCFS	ADNRS (DCFS)	\$	31,000	\$	28,184	\$	(2,816)				
	TARZANA TREATMENT CENTER		4	PH-000920E	DCFS	ADNRS (DCFS)	\$	48,000	\$	43,641	\$	(4,359)				
							\$	353,893	\$	321,747	\$	(32,146)				
							\$	2,753,821	\$	2,503,668	\$	(250,153)				

SUBSTANCE ABUSE PREVENTION AND CONTROL

General Relief Agreements

#	Agency	SUP	Contract #	Subtype	Modality	Current 2009-2010 Funding								Current 2009-2010 Funding				11137		_	ed 2010-11 nding	Variance
				; 1																		
1	ALCOHOLISM CENTER FOR WOMEN, INC.	1	PH-000704A	GR	OC (GR)	\$	3,144	\$	3,144	\$0												
	ALCOHOLISM CENTER FOR WOMEN, INC.	1	PH-000704B	GR	RS (GR)	\$	34,484	\$	34,484	\$0												
						\$	37,628	\$	37,628	\$0												
2	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000701A	GR	OC (GR)	\$	31,627	\$	31,627	\$0												
3	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000757A	GR	OC (GR)	\$	40,235	\$	40,235	\$0												
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000757B	GR	RS (GR)	\$	222,931	\$	222,931	\$0												
						\$	263,166	\$	263,166	\$0												
4	AVALON-CARVER COMMUNITY CENTER	2	PH-000698A	GR	OC (GR)	\$	43,076	\$	43,076	\$0												
5	BEACON HOUSE ASSOCIATION OF SAN PEDRO (THE)	4	PH-000783A	GR	RS (GR)	\$	60,849	\$	60,849	\$0												
6	BEHAVIORAL HEALTH SERVICES, INC.	3	PH-000643A	GR	OC (GR)	\$	15,310	\$	15,310	\$0												
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000643B	GR	OC (GR)	\$	40,725	\$	40,725	\$0												
	BEHAVIORAL HEALTH SERVICES, INC.	4	PH-000643C	GR	OC (GR)	\$	48,563	\$	48,563	\$0												
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000643D	GR	RDTX (GR)	\$	173,192	\$	173,192	\$0												
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000643E	GR	RS (GR)	\$	97,940	\$	97,940	\$0												
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000643F	GR	RS (GR)	\$	61,802	\$	61,802	\$0												
						\$	437,532	\$	437,532	\$0												

	Genera	al Relief Agree	ments				
7 CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000712A	GR	OC (GR)	\$ 37,766	\$ 37,766	\$0
CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000712B	GR	OC (GR)	\$ 19,993	\$ 19,993	\$0
CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000712C	GR	RS (GR)	\$ 90,577	\$ 90,577	\$0
CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000712D	GR	RS (GR)	\$ 41,863	\$ 41,863	\$0
					\$ 190,199	\$ 190,199	\$0
8 CANON HUMAN SERVICES, INC.	2	PH-000861A	GR	OC (GR)	\$ 13,998	\$ 13,998	\$0
9 CHABAD OF CALIFORNIA, INC.	2	PH-000845A	GR	RS (GR)	\$ 183,165	\$ 183,165	\$0
10 CITY OF COMPTON	2	PH-000910A	GR	OC (GR)	\$ 3,489	\$ 3,489	\$0
11 CITY OF PASADENA	5	PH-000940A	GR	OC (GR)	\$ 27,233	\$ 27,233	\$0
12 CLARE FOUNDATION, INC.	3	PH-000888A	GR	OC (GR)	\$ 22,862	\$ 22,862	\$0
CLARE FOUNDATION, INC.	3	PH-000888B	GR	RS (GR)	\$ 127,289	\$ 127,289	\$0
					\$ 150,151	\$ 150,151	\$0
13 CLINICA MONSENOR OSCAR A. ROMERO	1	PH-000696A	GR	OC (GR)	\$ 15,309	\$ 15,309	\$0
14 CRI-HELP, INC.	3	PH-000703A	GR	RS (GR)	\$ 147,879	\$ 147,879	\$0
CRI-HELP, INC.	1	PH-000703B	GR	RS (GR)	\$ 69,054	\$ 69,054	\$0
					\$ 216,933	\$ 216,933	\$0
15 DIDI HIRSCH PSYCHIATRIC SERVICE	1	PH-000689A	GR	OC (GR)	\$ 10,662	\$ 10,662	\$0
DIDI HIRSCH PSYCHIATRIC SERVICE	3	PH-000689B	GR	RS (GR)	\$ 127,385	\$ 127,385	\$0
					\$ 138,047	\$ 138,047	\$0

16 DO IT NOW FOUNDATION	Genera	PH-000730A	ments GR	OC (GR)	\$ 36,394	\$ 36,394	\$0
17 EL PROYECTO DEL BARRIO	3	PH-000926A	GR	OC (GR)	\$ 10,905	\$ 10,905	\$0
18 FAMILY SERVICE OF LONG BEACH	4	PH-000679A	GR	OC (GR)	\$ 33,566	\$ 33,566	\$0
19 GRANDVIEW FOUNDATION, INC.	5	PH-000740A	GR	OC (GR)	\$ 16,358	\$ 16,358	\$0
20 HIS SHELTERING ARMS, INC.	2	PH-000840A	GR	RS (GR)	\$ 49,397	\$ 49,397	\$0
21 HOMELESS HEALTH CARE LOS ANGELES, INC.	1	PH-000732A	GR	OC (GR)	\$ 105,040	\$ 105,040	\$0
22 HOUSE OF HOPE FOUNDATION, INC.	4	PH-000690A	GR	RS (GR)	\$ 60,086	\$ 60,086	\$0
23 I-ADARP, INC.	3	PH-000658A	GR	OC (GR)	\$ 13,424	\$ 13,424	\$0
I-ADARP, INC.	3	PH-000658B	GR	OC (GR)	\$ 23,918	\$ 23,918	\$0
					\$ 37,342	\$ 37,342	\$0
24 JOINT EFFORTS, INC.	4	PH-000938A	GR	OC (GR)	\$ 37,402	\$ 37,402	\$0
25 LITTLE HOUSE	4	PH-000671A	GR	RS (GR)	\$ 42,085	\$ 42,085	\$0
26 LIVE AGAIN RECOVERY HOME, INC.	5	PH-000692A	GR	RS (GR)	\$ 50,633	\$ 50,633	\$0
27 LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000842A	GR	OC (GR)	\$ 53,953	\$ 53,953	\$0
LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000842B	GR	RS (GR)	\$ 44,668	\$ 44,668	\$0
LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000842C	GR	OC (GR)	\$ 42,332	\$ 42,332	\$0
					\$ 140,953	\$ 140,953	\$0

28 MARY LIND RECOVERY CENTERS	Senera 3	PH-000890A	ments GR	RS (GR)	\$ 70,560	\$ 70,560	\$0
29 MELA COUNSELING SERVICES CENTER, INC.	1	PH-000869A	GR	OC (GR)	\$ 51,357	\$ 51,357	\$0
30 MID VALLEY RECOVERY SERVICES, INC.	1	PH-000695A	GR	OC (GR)	\$ 84,544	\$ 84,544	\$0
MID VALLEY RECOVERY SERVICES, INC.	1	PH-000695B	GR	RS (GR)	\$ 250,315	\$ 250,315	\$0
					\$ 334,859	\$ 334,859	\$0
31 MINI TWELVE STEP HOUSE, INC.	2	PH-000898A	GR	OC (GR)	\$ 38,283	\$ 38,283	\$0
MINI TWELVE STEP HOUSE, INC.	2	PH-000898B	GR	RS (GR)	\$ 88,227	\$ 88,227	\$0
					\$ 126,510	\$ 126,510	\$0
32 MJB TRANSITIONAL RECOVERY, INC.	2	PH-001012A	GR	OC (GR)	\$ 59,154	\$ 59,154	\$0
33 NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	4	PH-000896A	GR	OC (GR)	\$ 27,278	\$ 27,278	\$0
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMONA VALLEYS, INC.	5	PH-000691A	GR	OC (GR)	\$ 17,156	\$ 17,156	\$0
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY, INC.	3	PH-000781A	GR	OC(GR-MS)	\$ 49,198	\$ 49,198	\$0
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY, INC.	3	PH-000781A	GR	OC (GR)	\$ 16,062	\$ 16,062	\$0
					\$ 65,260	\$ 65,260	\$0
36 NEW WAY FOUNDATION, INC.	5	PH-000697A	GR	RS (GR)	\$ 42,076	\$ 42,076	\$0
37 PALM HOUSE, INC.	2	PH-000668A	GR	RS (GR)	\$ 37,680	\$ 37,680	\$0

ATTACHMENT C

	Genera	ıl Relief Agree					
38 PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001013A	GR	OC (GR)	\$ 346,858 \$	346,858	\$0
PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001013B	GR	RS (GR)	\$ 215,290 \$	215,290	\$0
					\$ 562,148 \$	562,148	\$0
39 PEOPLE IN PROGRESS, INC.	1	PH-000836A	GR	OC (GR)	\$ 64,236 \$	64,236	\$0
PEOPLE IN PROGRESS, INC.	3	PH-000836B	GR	RS (GR)	\$ 42,953 \$	42,953	\$0
					\$ 107,189 \$	107,189	\$0
40 PHOENIX HOUSES OF LOS ANGELES, INC.	3	PH-000784A	GR	RS (GR)	\$ 64,193 \$	64,193	\$0
41 PLAZA COMMUNITY CENTER	1	PH-000669A	GR	OC (GR)	\$ 34,823 \$	34,823	\$0
42 POMONA COMMUNITY CRISIS CENTER, INC.	1	PH-000863A	GR	OC (GR)	\$ 24,503 \$	24,503	\$0
43 PRINCIPLES, INC.	5	PH-000873A	GR	OC (GR)	\$ 14,318 \$	14,318	\$0
PRINCIPLES, INC.	5	PH-000873B	GR	RS (GR)	\$ 78,042 \$	78,042	\$0
					\$ 92,360 \$	92,360	\$0
44 PROTOTYPES	1	H-801598A	GR	OC (GR)	\$ 15,891 \$	15,891	\$0
PROTOTYPES	1	H-801598B	GR	RS (GR)	\$ 66,938 \$	66,938	\$0
					\$ 82,829 \$	82,829	\$0
45 SANTA ANITA FAMILY SERVICES	5	PH-000872A	GR	OC (GR)	\$ 8,007 \$	8,007	\$0
SANTA ANITA FAMILY SERVICES	5	PH-000872B	GR	OC (GR)	\$ 40,763 \$	40,763	\$0
					\$ 48,770 \$	48,770	\$0
46 SANTA MONICA BAY AREA DRUG ABUSE COUNCIL	3	PH-000871A	GR	OC (GR)	\$ 6,519 \$	6,519	\$0
47 SHIELDS FOR FAMILIES, INC.	2	PH-000660A	GR	OC (GR)	\$ 54,530 \$	54,530	\$0

	Genera	I Relief Agree	ments				
48 SOCIAL MODEL RECOVERY SYSTEMS, INC.	5	PH-000930A	GR	OC (GR)	\$ 16,401 \$	16,401	\$0
SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000750A	GR	OC (GR)	\$ 9,886 \$	9,886	\$0
50 SOUTH BAY HUMAN SERVICES COALITION	4	PH-000785A	GR	OC (GR)	\$ 15,461 \$	15,461	\$0
51 SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000659A	GR	OC (GR)	\$ 40,566 \$	40,566	\$0
SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000659B	GR	RS (GR)	\$ 41,723 \$	41,723	\$0
					\$ 82,289 \$	82,289	\$0
52 SPIRITT FAMILY SERVICES, INC.	4	PH-000841A	GR	OC (GR)	\$ 12,047 \$	12,047	\$0
SPIRITT FAMILY SERVICES, INC.	5	PH-000841B	GR	OC (GR)	\$ 595 \$	595	\$0
SPIRITT FAMILY SERVICES, INC.	1	PH-000841C	GR	OC (GR)	\$ 62,062 \$	62,062	\$0
					\$ 74,704 \$	74,704	\$0
53 STEPPING STONES HOME	5	PH-000790A	GR	RS (GR)	\$ 47,725 \$	47,725	\$0
54 SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000670A	GR	OC (GR)	\$ 82,483 \$	82,483	\$0
55 SUNRISE COMMUNITY COUNSELING CENTER	1	PH-000885A	GR	OC (GR)	\$ 23,385 \$	23,385	\$0

	General I	Relief Agree	ments	OC (GR-DUAL					
56 TARZANA TREATMENT CENTER	3	PH-000918A	Diagnosis	DIAGNOSIS)	\$	20,312	\$	20,312	\$0
			GR / General	,					
TARZANA TREATMENT CENTER	3	PH-000918A		OC (GR GENERAL	\$	20,311	\$	20,311	\$0
			Population	POPULATION)					
TARZANA TREATMENT CENTER	5	PH-000918B	GR / Dual	OC (GR-DUAL	\$	18,636	\$	18,636	\$0
			Diagnosis	DIAGNOSIS)					
TARZANA TREATMENT CENTER	5	PH-000918B	GR / General	OC (GR GENERAL	\$	18,634	\$	18,634	\$0
			Population	POPULATION)	-	,	_	,	**
TARZANA TREATMENT CENTER	4	PH-000918C	GR / Dual	OC (GR-DUAL	\$	16,784	\$	16,784	\$0
	·	111 0007100	Diagnosis	DIAGNOSIS)	Ψ	10,701	Ψ	10,70	40
TARZANA TREATMENT CENTER	4	PH-000918C	GR / General	OC (GR GENERAL	\$	16,782	\$	16,782	\$0
TARZAVA TREATMENT CENTER	7	111-000716C	Population	POPULATION)	Ψ	10,762	Ψ	10,762	90
TARZANA TREATMENT CENTER	3	PH-000918D	GR / Dual	RDTX (GR-DUAL	\$	366,407	¢	266 407	\$0
TARZANA TREATMENT CENTER	3	PH-000918D	Diagnosis	DIAGNOSIS)	Ф	300,407	Ф	366,407	\$0
TARZANIA TREATMENT CENTRER	2	DII 000010D	GR / General	RDTX (GR-GENERAL	ф	252 607	ф	252 607	40
TARZANA TREATMENT CENTER	3	PH-000918D	Population	POPULATION)	\$	252,607	\$	252,607	\$0
	_		GR / Dual	RS (GR-DUAL					**
TARZANA TREATMENT CENTER	3	PH-000918E	Diagnosis	DIAGNOSIS)	\$	127,282	\$	127,282	\$0
			GR / General	RS (GR-GENERAL					
TARZANA TREATMENT CENTER	3	PH-000918E	Population	POPULATION)	\$	96,521	\$	96,521	\$0
			GR / Dual	RS (GR-DUAL					
TARZANA TREATMENT CENTER	3	PH-000918F	Diagnosis	DIAGNOSIS)	\$	92,213	\$	92,213	\$0
			GR / General	RS (GR-GENERAL					
TARZANA TREATMENT CENTER	3	PH-000918F	Population	POPULATION)	\$	61,476	\$	61,476	\$0
			GR / Dual	,					
TARZANA TREATMENT CENTER	4	PH-000918G		RS (GR-DUAL	\$	210,483	\$	210,483	\$0
			Diagnosis	DIAGNOSIS)					
TARZANA TREATMENT CENTER	4	PH-000918G	GR / General	RS (GR-GENERAL	\$	151,989	\$	151,989	\$0
			Population	POPULATION)	ф	4.50.425	Φ.	4 450 425	40
					\$	1,470,437	\$	1,470,437	\$0
57 TWIN PALMS RECOVERY CENTER	1	PH-000868A	GR	OC (GR)	\$	24,180	\$	24,180	\$0
58 URDC HUMAN SERVICES CORPORATION	5	PH-000839A	GR	OC (GR)	\$	7,968	\$	7,968	\$0
59 VOLUNTEERS OF AMERICA OF LOS ANGELES	3	PH-000843A	GR	RS (GR)	\$	91,751	\$	91,751	\$0
VOLUNTEERS OF AMERICA OF LOS ANGELES	2	PH-000843B	GR	RS (GR)	\$	206,708	\$	206,708	\$0
					\$	298,459	Ф	298,459	\$0
					Ф	490,439	Ф	470,439	\$ 0
					\$	6,495,695	\$	6,495,695	

Family Dependency Drug Court Agreements

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Fund	ing	Proposed 2010- 11 Funding	Variance
1	BEHAVIORAL HEALTH SERVICES, INC.	4	PH-000646A	Family Dependency Drug Court	ADFLC (FDDC)	\$ 29.1	70	\$ 29,170	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000646B	Family Dependency Drug Court	ODCTRS (FDDC)		12		\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000646C	Family Dependency Drug Court	, ,	\$ 162,6		\$ 162,601	\$0
						\$ 279,0	83	\$ 279,083	\$0
2	CRI-HELP, INC.	1	PH-000699A	Family Dependency Drug Court	ADFLC (FDDC)	\$ 27,8	99	\$ 27,899	\$0
	CRI-HELP, INC.	1	PH-000699B	Family Dependency Drug Court	ODCTRS (FDDC)	\$ 51,0	24	\$ 51,024	\$0
	CRI-HELP, INC.	1	PH-000699C	Family Dependency Drug Court	RS (FDDC)	\$ 125,8	35	\$ 125,835	\$0
						\$ 204,7	58	\$ 204,758	\$0
3	SPECIAL SERVICE FOR GROUPS	2	PH-000914A	Family Dependency Drug Court	ADFLC (FDDC)	\$ 22,4	-80	\$ 22,480	\$0
	SPECIAL SERVICE FOR GROUPS	2	PH-000914B	Family Dependency Drug Court		\$ 59,9	07	\$ 59,907	\$0
	SPECIAL SERVICE FOR GROUPS	2	PH-000914C	Family Dependency Drug Court	RS (FDDC)	\$ 119,2	.06	\$ 119,206	\$0
						\$ 201,5	93	\$ 201,593	\$0
4	TARZANA TREATMENT CENTER	5	PH-000921A	Family Dependency Drug Court	ADFLC (FDDC)	\$ 14,1	55	\$ 14,155	\$0
	TARZANA TREATMENT CENTER	5	PH-000921B	Family Dependency Drug Court	ODCTRS (FDDC)	\$ 59,9	07	\$ 59,907	\$0
	TARZANA TREATMENT CENTER	5	PH-000921C	Family Dependency Drug Court	RS (FDDC)	\$ 134,1	21	\$ 134,121	\$0
					• •	\$ 208,1	83	\$ 208,183	\$0
						\$ 893,6	17	\$ 893,617	

STATE OF CALIFORNIA

STANDARD	AGREEMENT
STD. 213 (Rev. 6/03)	

X (CHECK HERE IF ADDITIONAL PAGE	S ARE ATTACHED8	Pages	AGREEMENT NUMBER	
				10-NNA19	V.0
		_		REGISTRATION NUMBER	
1.	This Agreement is entered in	o between the State	Agency and	Contractor named below	<i>7</i> .
	STATE AGENCY'S NAME	rua Broaromo (ADB)			
	Department of Alcohol and Di	ug Piograms (ADP)		_	
	County of Los Angeles				
2.	The term of this				
	Agreement is:	July 1, 2010	through	June 30, 2013	
3.	The maximum amount of this	FY 2010-11	\$139,3	51,403	
	Agreement is:	FY 2011-12	\$139,3	51,403	
		FY 2012-13	\$139,3	<u>51,403</u>	
		Total	\$418,0	54,209	

All items noted below are part of the Agreement and incorporated herein:

Exhibit A1 – Fiscal Contract Detail, Budget 1 (NNA and DMC)
Exhibit B – General Terms and Conditions
Exhibit C – Negotiated Net Amount Provisions
Exhibit D – Drug Medical Substance Abuse Treatment
Services provisions

IN WITNESS WHEREOF, this Agreement has been executed by the parties hereto.

CONTRAC	CALIFORNIA Department of General Services				
CONTRACTOR'S NAME (If other than an individual, state whether	Use Only				
County of Los Angeles		1			
BY (Authorized Signature)	DATE SIGNED (Do not type)	7			
&					
PRINTED NAME AND TITLE OF PERSON SIGNING					
STATE OF CAL	IFORNIA	4			
AGENCY NAME					
Department of Alcohol and Drug Programs					
BY (Authorized Signature)	DATE SIGNED (Do not type)				
E					
PRINTED NAME AND TITLE OF PERSON SIGNING		Exempt per: DGS memo dated			
Brian Marshall-Winks, Manager, Fiscal and	7/10/96 and Welfare and Institutions Code 14087.4				
ADDRESS		· · · · · · · · · · · · · · · · · · ·			
1700 K Street, Sacramento, CA 95814-4037					

Exhibit A1

Los Angeles County

Budget 1 (NNA and DMC)

FISCAL CONTRACT DETAIL DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS Fiscal Year 2011-12 Negotiated Net Amount/Drug Medi-Cal Budget V.0

te Funds (July 1, 2011 to June 30, 2012) (12 Months)	Amo	<u>unts</u>	Totals/ PCA/Object Code
Regular State General Funds			
State General Funds - NNA	\$.	,586,664	51110/702.
State General Funds - DMC	\$ 37	7,272,646	51112/702.1
Total Regular State General Funds		\$	38,859,31
Perinatal State General Funds			
State General Funds - NNA		3,395,297	51113/702.2
State General Funds - DMC	\$	549,193	51111/702.2
Total Perinatal State General Funds		\$	3,944,49
Other State General Funds			
Women and Children's Residential Treatment Services Funds		2,132,488	51113/702.2
Parolee Services Network Funds	\$,584,915	51159/702.1
Total Other State General Funds		\$	3,717,40
TOTAL STATE GENERAL FUNDS		\$	46,521,20
PT Block Grant - 93.959 (FFY 2012 Award) (October 1, 2011 to June 30, 20 SAPT Female Offender Treatment Services - FFY 2012 Award			51163/702
SAPT Female Offender Treatment Services - FFY 2012 Award SAPT Discretionary - FFY 2012 Award SAPT Adolescent/Youth Treatment Program - FFY 2012 Award SAPT Friday Night Live/Club Live - FFY 2012 Award SAPT Primary Prevention Set-Aside - FFY 2012 Award SAPT HIV Set-Aside - FFY 2012 Award SAPT Perinatal Set-Aside - FFY 2012 Award SAPT Special Projects - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award	\$ 38 \$ 5 \$ 12 \$ 4	382,458 3,189,120 1,597,508 150,000 2,946,617 1,477,013 3,704,357	51163/702.4 51163/702.3 51163/702.3 51162/702.3 51162/702.3 51163/702.3 51166/702.3 Various/702.4
SAPT Female Offender Treatment Services - FFY 2012 Award SAPT Discretionary - FFY 2012 Award SAPT Adolescent/Youth Treatment Program - FFY 2012 Award SAPT Friday Night Live/Club Live - FFY 2012 Award SAPT Primary Prevention Set-Aside - FFY 2012 Award SAPT HIV Set-Aside - FFY 2012 Award SAPT Perinatal Set-Aside - FFY 2012 Award SAPT Special Projects - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Drug Medi-Cal Funds (Reimbursement) (July 1, 2011 to June 30, 2012 Drug Medi-Cal (Federal Share Only) Perinatal Drug Medi-Cal (Federal Share Only)	\$ 38 \$ 5 \$ 12 \$ 2 \$ 3 \$ 3	382,458 3,189,120 1,597,508 150,000 2,946,617 1,477,013 3,704,357 - \$ (ns) 0,883,143 499,984	51163/702.: 51163/702.: 51162/702.: 51162/702.: 51163/702.: 51166/702.: Various/702.: 61,447,07
SAPT Female Offender Treatment Services - FFY 2012 Award SAPT Discretionary - FFY 2012 Award SAPT Adolescent/Youth Treatment Program - FFY 2012 Award SAPT Friday Night Live/Club Live - FFY 2012 Award SAPT Primary Prevention Set-Aside - FFY 2012 Award SAPT HIV Set-Aside - FFY 2012 Award SAPT Perinatal Set-Aside - FFY 2012 Award SAPT Special Projects - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Drug Med-Cal Funds (Reimbursement) (July 1, 2011 to June 30, 2012 Drug Medi-Cal (Federal Share Only)	\$ 38 \$ 5 \$ 12 \$ 2 \$ 3 \$ 3	382,458 3,189,120 ,597,508 150,000 2,946,617 1,477,013 3,704,357 - \$	51163/702.: 51163/702.: 51162/702.: 51162/702.: 51163/702.: 51166/702.: Various/702.: 61,447,07
SAPT Female Offender Treatment Services - FFY 2012 Award SAPT Discretionary - FFY 2012 Award SAPT Adolescent/Youth Treatment Program - FFY 2012 Award SAPT Friday Night Live/Club Live - FFY 2012 Award SAPT Primary Prevention Set-Aside - FFY 2012 Award SAPT HIV Set-Aside - FFY 2012 Award SAPT Perinatal Set-Aside - FFY 2012 Award SAPT Special Projects - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Total SAPT Block Grant - FFY 2012 Award Drug Medi-Cal Funds (Reimbursement) (July 1, 2011 to June 30, 2012 Drug Medi-Cal (Federal Share Only) Perinatal Drug Medi-Cal (Federal Share Only)	\$ 38 \$ 5 \$ 12 \$ 2 \$ 3 \$ 3	382,458 3,189,120 1,597,508 150,000 2,946,617 1,477,013 3,704,357 - \$ (ns) 0,883,143 499,984	51163/702.3 51163/702.4 51162/702.3 51163/702.3 51166/702.3 Various/702.4 61,447,07 7000/51194/702.3 7000/51195/702.3 31,383,12

Exhibit A1
Budget 1 (NNA and DMC)

Los Angeles County

FISCAL CONTRACT DETAIL DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS Fiscal Year 2012-13 Negotlated Net Amount/Drug Medi-Cal Budget V.0

				Totals/
State Funds (July 1, 2012 to June 30, 2013) (12 Months)	<u>A</u> 1	mounts	PC	A/Object Code
Regular State General Funds				
State General Funds - NNA	\$	1,586,664		51210/702.11
State General Funds - DMC	\$	37,272,646		51212/702.10
Total Regular State General Funds			\$	38,859,310
Perinatal State General Funds				
State General Funds - NNA	\$	3,395,297]	51213/702.21
State General Funds - DMC	\$	549,193		51211/702.20
Total Perinatal State General Funds			\$	3,944,490
Other State General Funds				
Women and Children's Residential Treatment Services Funds	\$	2,132,488]	51213/702.22
Parolee Services Network Funds	\$	1,584,915	1	51259/702.18
Total Other State General Funds			\$	3,717,403
TOTAL STATE GENERAL FUNDS			\$	46,521,203
ederal Funds				
SAPT Block Grant - 93.959 (FFY 2013 Award) (October 1, 2012 to June 30, 20	14 - 21 N	lonths)		
SAPT Female Offender Treatment Services - FFY 2013 Award	\$	382,458	1	51263/702.40
SAPT Discretionary - FFY 2013 Award	\$	38,189,120	1	51263/702.30
SAPT Adolescent/Youth Treatment Program - FFY 2013 Award	\$	1,597,508	1	51263/702.49
SAPT Friday Night Live/Club Live - FFY 2013 Award	\$	150,000	1	51262/702.32
SAPT Primary Prevention Set-Aside - FFY 2013 Award	\$	12,946,617		51262/702.31
SAPT HIV Set-Aside - FFY 2013 Award	\$	4,477,013	1	51263/702.35
SAPT Perinatal Set-Aside - FFY 2013 Award	\$	3,704,357]	51266/702.36
SAPT Special Projects - FFY 2013 Award	\$	-		Various/702.45
Total SAPT Block Grant - FFY 2013 Award			\$	61,447,073
Federal Drug Med-Cal Funds (Reimbursement) (July 1, 2012 to June 30, 2013	3) (12 <u>Mo</u>	nths)		
Drug Medi-Cal (Federal Share Only)	\$	30,883,143	70	00/51294/702.10
Perinatal Drug Medi-Cal (Federal Share Only)	\$	499,984		00/51295/702.20
Total Federal Drug Medi-Cal Funds			\$	31,383,127
TOTAL FEDERAL FUNDS		_	\$	92,830,200
GRAND TOTAL - ALL FUNDS	s		\$	139,351,403

Exhibit A1
Budget 1 (NNA and DMC)

Los Angeles County

FISCAL CONTRACT DETAIL DEPARTMENT OF ALCOHOL AND DRUG PROGRAMS Fiscal Year 2010-11 Negotiated Net Amount/Drug Medi-Cal Budget V.0

te Funds (July 1, 2010 to June 30, 2011) (12 Months)	<u>Amounts</u>	Totals/ PCA/Object Code
Regular State General Funds		
State General Funds - NNA	\$ 1,586,664	51010/702.
State General Funds - DMC	\$ 31,898,979	
Total Regular State General Funds		\$ 33,485,64
Perinatal State General Funds		
State General Funds - NNA	\$ 3,395,297	51013/702.
State General Funds - DMC	\$ 462,195	51011/702.
Total Perinatal State General Funds		\$ 3,857,49
Other State General Funds		
Women and Children's Residential Treatment Services Funds	\$ 2,132,488	51013/702.
Parolee Services Network Funds	\$ 1,584,915	
Total Other State General Funds		\$ 3,717,40
TOTAL STATE GENERAL FUNDS		\$ 41,060,53
leral Funds PT Block Grant - 93.959 (FFY 2011 Award) (October 1, 2010 to June 30, 20)12 - 21 Months)	
- Distriction 1.1. 2011 / Nivana 1000000 1 2010 to ballo by 20		_
SAPT Female Offender Treatment Services - FFY 2011 Award	\$ 382,458	-
SAPT Discretionary - FFY 2011 Award	\$ 38,189,120	
SAPT Adolescent/Youth Treatment Program - FFY 2011 Award	\$ 1,597,508	-
SAPT Friday Night Live/Club Live - FFY 2011 Award	\$ 150,000	-
SAPT Primary Prevention Set-Aside - FFY 2011 Award	\$ 12,946,617	
SAPT HIV Set-Aside - FFY 2011 Award	\$ 4,477,013	4
SAPT Perinatal Set-Aside - FFY 2011 Award	\$ 3,704,357	51066/702.
SAPT Special Projects - FFY 2011 Award	\$ -	Various/702.
Total SAPT Block Grant - FFY 2011 Award		\$ 61,447,07
leral Drug Med-Cal Funds (Reimbursement) (July 1, 2010 to June 30, 2011	1) (12 Months)	
Drug Medi-Cal (Federal Share Only)	\$ 30,883,143	7000/51094/702.
ARRA DMC Treatment and Recovery - Federal Share Increase	\$ 5,373,667	
Perinatal Drug Medi-Cal (Federal Share Only)	\$ 499,984	7000/51095/702.
ARRA DMC Perinatal (Federal Share Only)	\$ 86,998	7000/51097/702.
		\$ 36,843,79
Total Federal Drug Medi-Cal Funds		
Total Federal Drug Medi-Cal Funds TOTAL FEDERAL FUNDS		\$ 98,290,86

Fiscal Year 2010-11 thru Fiscal Year 2012-13 Multi-Year

Negotiated Net Amount and Drug Medi-Cal County Contract Boilerplate

PRELIMINARY EFFECTIVE 7-1-10

Negotiated Net Amount and Drug Medi-Cal

County Contract Boilerplate

Fiscal Year 2010-11 through FY 2012-13

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- E Use of State Funds
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- Ferformance Requirements

		a.
• .		
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÷ .		
:		

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GENERAL TERMS AND CONDITIONS

A. Contract Exhibits

This Contract between the Department of Alcohol and Drug Programs (State) and the county named in the Standard Agreement attached hereto (Contractor) consists of the Standard Agreement; Exhibit A1, listing of ADP allocated funding sources; Exhibit B, entitled "General Terms and Conditions," which contains Contract provisions applicable to all of the Contractors; Exhibit C, which defines the rights and obligations of the parties regarding Negotiated Net Amount (NNA) funds; and Exhibit D (if applicable), which defines the rights and obligations of the parties regarding Medicaid/Medi-Cal funds, as expended through the Drug Medi-Cal (DMC) Program.

B. Contract Term

The term of this Contract shall be from July 1, 2010, through June 30, 2013. Except as provided in Exhibit C, Article III, Sections H and I, the expenditure period for the funds available hereunder shall be as stated on Exhibit A1. State is under no obligation to extend or renew this Contract.

C. Nullification of Exhibit D (if applicable)

The parties agree that if the Contractor fails to comply with the provisions of Health and Safety Code (hereinafter referred to as HSC) Section 11758.46, Exhibit D shall be null and void and severed from the remainder of this Contract.

In the event Exhibit D becomes null and void, an updated Exhibit A1 will take effect reflecting the removal of DMC State General Fund (SGF), DMC Perinatal State General Fund (PSGF), and federal Medicaid funds from this Contract. Exhibit C of this Contract will remain in effect until amended or terminated.

D. Unenforceable Provisions

In the event any provision of this Contract is held invalid or unenforceable by any court of competent jurisdiction, the holding will not invalidate or render unenforceable any other provision hereof.

E. Use of State Funds

 Contractor may not use SGF DMC funds allocated pursuant to Exhibit D to pay for any non-DMC services. Contractor may not transfer SGF DMC funds allocated pursuant to Exhibit D to SGF discretionary funds allocated pursuant to Exhibit C. 2. SGF provided by the California Department of Corrections and Rehabilitation (CDCR) through an interagency agreement shall be subject to specific expenditure requirements as stated in the "Services to California Department of Corrections and Rehabilitation Parolee Services Network," as identified in Document 1D(a) of Exhibit C, which is incorporated by this reference.

F. Contract Amendments

- Both the Contractor and the State may agree to amend or renegotiate the Contract.
- 2. Contract amendments will be required to change encumbered amounts for each year of a multi-year contract period, of which the first amendment will be based on the Governor's Budget Act allocation of that specific fiscal year. The signed contract from the Contractor will be due to the Department of Alcohol and Drug Programs within 90 days from the Department's issuance to the County. If the signed Contract from the Contractor is not received within 90 days from the Department's issuance to the County, the State may withhold all NNA payments under Exhibit C of this Contract until the required amendment is received by the State.
- Contract amendments may be requested by the Contractor until May 1 of each of the contract's fiscal years. An amendment proposed by either party shall be forwarded in writing to the other party.
 - (a) The proposed amendment submitted by Contractor shall include the proposed changes, and a statement of the reason and basis for the proposed change.
 - (b) Amendments shall be duly approved by the County Board of Supervisors or its authorized designee, and signed by a duly authorized representative.
- 4. No amendment or variation of the terms of this Contract shall be valid unless made in writing, signed by the parties and approved as required. No oral understanding or agreement not incorporated in the Contract is binding on any of the parties.
- Contractor acknowledges that any newly allocated funds that are in excess
 of the initial amount for each fiscal year may be forfeited if the State does not
 receive a fully executable contract amendment on or before June 30.

G. Termination

- 1. This Contract may be terminated by either party by delivering written notice of termination to the other party at least 30 days prior to the effective date of termination. The notice shall state the effective date of and reason for the termination. In the event of changes in law that affect provisions of this Contract, the parties agree to amend the affected provisions to conform to the changes in law retroactive to the effective date of such changes in law. The parties further agree that the terms of this Contract are severable and in the event that changes in law render provisions of the Contract void, the unaffected provisions and obligations of this Contract will remain in full force and effect.
- 2. State may terminate this Contract immediately for cause. The term "for cause" means that the Contractor failed to meet the terms, conditions, and/or responsibilities of the Contract. State shall provide the Contractor with written notice of the termination, including the effective date and reason for the termination. The termination of the Contract shall be effective as of the date indicated in the written notice.
- 3. The following additional provisions regarding termination apply only to Exhibit D of this Contract:
 - (a) In the event the federal Department of Health and Human Services (hereinafter referred to as DHHS), the California Department of Health Care Services (hereinafter referred to as DHCS), or State determines Contractor does not meet the requirements for participation in the DMC Program, State will terminate payments for services provided pursuant to Exhibit D of this Contract for cause.
 - (b) All obligations to provide covered services under this Contract will automatically terminate on the effective date of any termination of this Contract. Contractor will be responsible for providing or arranging for covered services to beneficiaries until the effective date of termination or expiration of the Contract.
 - Contractor will remain liable for processing and paying invoices and statements for covered services and utilization review requirements prior to the expiration or termination until all obligations have been met.
 - (c) In the event Exhibit D of this Contract is nullified, Contractor shall refer DMC clients to providers who are certified to provide the type(s) of services the client has been receiving.

4. In the event this Contract is terminated, Contractor shall deliver its entire fiscal and program records pertaining to the performance of this Contract to the State, which will retain the records for the required retention period.

H. Audit

- In addition to the audit requirements in Exhibits C and D, this Contract, and any Subcontracts, shall be subject to the examination and audit by the California Bureau of State Audits for a period of three years from the date that final payment is made pursuant to the Contract (Government Code, Section 10527).
- Contractor agrees that the State, the Comptroller General of the United States, and any authorized representatives have the right to review, obtain, and copy all records pertaining to the performance of this Contract. Contractor agrees to provide the State with any and all relevant information requested.
- 3. All expenditures of state and federal funds furnished to the Contractor and its Subcontractors pursuant to this Contract are subject to audit by the State. Such audits shall consider and build upon external independent audits performed pursuant to audit requirements of the Office of Management and Budget (OMB) Circular A-133 (Revised June 27, 2003). Objectives of such audits may include, but not be limited to, the following:
 - (a) To determine whether units of service claimed/reported are properly documented by service records and accurately accumulated for claiming/reporting;
 - (b) To validate data reported by the Contractor for prospective contract negotiations;
 - (c) To provide technical assistance in addressing current year activities and providing recommendations on internal controls, accounting procedures, financial records, and compliance with laws and regulations;
 - (d) To determine the cost of services, net of related patient and participant fees, third-party payments, and other related revenues and funds:
 - (e) To determine that expenditures are made in accordance with applicable state and federal laws and regulations and contract requirements; and/or,

- (f) To determine the facts in relation to analysis of data, complaints, or allegations, which may be indicative of fraud, abuse, willful misrepresentation, or failure to achieve the Contract objectives of Exhibit C or Exhibit D.
- 4. Contractor shall comply, and shall require that its Subcontractors comply, with all terms and conditions of this Contract and all pertinent state and federal statutes and regulations. Contractor and its Subcontractors shall permit the State, DHCS, DHHS, Comptroller General of the United States, or other authorized state or federal agencies and representatives, to inspect or otherwise evaluate the quality, appropriateness, and timeliness of services performed under this Contract. Contractor shall allow the State, DHCS, DHHS, the Comptroller General of the United States, and other authorized state or federal agencies and representatives to review and copy any and all books and records maintained by the Contractor and its Subcontractors related to these services at any time during normal business hours. Unannounced visits may be made at the discretion of the State. Employees who might reasonably have information related to such records may be interviewed.
- 5. The refusal of the Contractor or its Subcontractors to permit access to and inspection of electronic or print books and records, physical facilities, and/or refusal to permit interviews with employees, as described in this part constitutes an express and immediate material breach of this Contract and will be sufficient basis to terminate the Contract for cause or default.
- I. Debarment and Suspension Certification
 - By signing this agreement, Contractor agrees to comply with federal suspension and debarment regulations found in 45 CFR Part 76. "Debarred" means excluded or disqualified from contracting with the federal, State or local government.
 - 2. By signing this agreement, Contractor certifies to the best of his or her knowledge and belief, that it and its principals:
 - (a) Are not presently debarred, suspended, proposed for debarment, declared ineligible or voluntarily excluded from participation in this transaction by any Federal department or agency.
 - (b) Will include a clause entitled, "Debarment and Suspension Certification" that essentially sets forth the provisions herein, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.

Exhibit B - Preliminary - County Contract - FY 2010 through FY 2013 - Multi-Year

- If the Contractor is unable to certify to any statements in this certification, Contractor shall submit an explanation to the State.
- If the Contractor knowingly violates this certification, in addition to other remedies available to the Federal Government, State may terminate this contract for cause or default.
- J. Lobbying and Restrictions and Disclosure Certification

Applicable to any federally funded grant or contract in excess of \$100,000 per Title 31, USC, Section 1352 and 45 CFR Part 93:

- Certification and Disclosure Requirements
 - (a) Each person (or recipient) who requests or receives a contract, subcontract, grant, or subgrant, which is subject to Title 31, USC, Section 1352, and which exceeds \$100,000 at any tier, shall file a certification (in the form set forth in Exhibit C, Document 1W, consisting of one page, entitled "Certification Regarding Lobbying") that the recipient has not made, and will not make, any payment prohibited by Paragraph 2 of this provision.
 - (b) Each recipient shall file a disclosure (in the form set forth in Exhibit C, Document 1X, entitled "Disclosure of Lobbying Activities Standard Form LLL") if any funds other than federally appropriated funds have been paid or will be paid to any person for influencing or attempting to influence any officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this federal grant.
 - (c) Each recipient shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, sub-grants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.
 - (d) Each recipient shall file a disclosure form at the end of each calendar quarter in which there occurs any event that requires disclosure or that materially affect the accuracy of the information contained in any disclosure form previously filed by such person under Paragraph 1(b) of this provision herein. An event that materially affects the accuracy of the information reported includes:

- i A cumulative increase of \$25,000 or more in the amount paid or expected to be paid for influencing or attempting to influence a covered federal action;
- ii A change in the person(s) or individuals(s) influencing or attempting to influence a covered federal action;
- iii A change in the officer(s), employee(s), or member(s) contacted for the purpose of influencing or attempting to influence a covered federal action;
- iv Each person (or recipient) who requests or receives from a person referred to in Paragraph 1(a) of this provision a contract, subcontract, grant or subgrant exceeding \$100,000 at any tier under a contract or grant shall file a certification, and a disclosure form, if required, to the next tier above; and,
- v All disclosure forms (but not certifications) shall be forwarded from tier to tier until received by the person referred to in Paragraph 1(a) of this provision. That person shall forward all disclosure forms to AOD program contract manager.

2. Prohibition

Title 31, USC, Section 1352, provides in part that no Federally appropriated funds may be expended, have been paid, or will be paid by the recipient of a federal contract, grant, loan, or cooperative agreement to pay any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with any of the following covered federal actions: the awarding of any federal contract, the making of any federal grant, the making of any federal loan, entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal contract, grant, loan, or cooperative agreement.

K. Restrictions on Grantee Lobbying – Appropriations Act Section 503

No part of any appropriation contained in this Act shall be used, other than for formal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, radio, television, or video presentation designed to support or defeat legislation pending before the Congress, except in presentation to the Congress itself or any State legislature, except in presentation to the Congress or any State legislative body itself.

 No part of any appropriation contained in this Act shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State legislature.

L. Hatch Act

Contractor agrees to comply with the provisions of the Hatch Act (Title 5 USC, Sections 1501-1508), which limit the political activities of employees whose principal employment activities are funded in whole or in part with federal funds.

M. Restrictions on Salaries

Contractor agrees that no part of any federal funds provided under this Contract shall be used by the Contractor or its Subcontractors to pay the salary and wages of an individual at a rate in excess of Level I of the Executive Schedule. Salary and wages schedules may be found at http://www.opm.gov/oca. SAPT Block Grant funds used to pay a salary in excess of the rate of basic pay for Level I of the Executive Schedule shall be subject to disallowance. The amount disallowed shall be determined by subtracting the individual's actual salary from the Level I rate of basic pay and multiplying the result by the percentage of the individual's salary that was paid with SAPT Block Grant funds (Reference: Terms and Conditions of the SAPT Block Grant award.)

N. Child Support Compliance Act

Contractor acknowledges that it:

- Recognizes the importance of child and family support obligations and shall fully comply with all applicable state and federal laws relating to child and family support enforcement, including but not limited to, disclosure of information and compliance with earnings assignment orders, as provided in Chapter 8 (commencing with Section 5200) of Part 5 of Division 9 of the California Family Code; and,
- To the best of its knowledge, is fully complying with the earnings assignment orders of all employees and is providing the names of all new employees to the New Hire Registry maintained by the California Employment Development Department.

Union Organizing

Contractor, by signing this Agreement, hereby acknowledges the applicability of California Government Code Sections 16645 through 16649 to this Contract.

- Contractor will not assist, promote, or deter union organizing by employees performing work on a state service contract, including a public works contract.
- 2. No state funds received under this Contract will be used to assist, promote, or deter union organizing.
- Contractor will not, for any business conducted under this Contract, use any state property to hold meetings with employees or supervisors, if the purpose of such meetings is to assist, promote or deter union organizing unless the state property is equally available to the general public for holding meetings.
- 4. If the Contractor incurs costs, or makes expenditures to assist, promote, or deter union organizing, Contractor will maintain records sufficient to show that no reimbursement from state funds has been sought for these costs, and the Contractor shall provide those records to the Attorney General upon request.

P. Primary Prevention

The SAPT Block Grant regulation defines "Primary Prevention Programs" as those programs directed at "individuals who have not been determined to require treatment for substance abuse". (45 CFR 96.121) Primary Prevention includes strategies, programs and initiatives which reduce both direct and indirect adverse personal, social, health, and economic consequences resulting from problematic alcohol and other drug (AOD) availability, manufacture, distribution, promotion, sales, and use. The desired result of primary prevention is to promote safe and healthy behaviors and environments for individuals, families and communities.

The Contractor shall expend not less than its allocated amount of the Substance Abuse Prevention and Treatment (SAPT) Block Grant on primary prevention as described in the SAPT Block Grant requirements. (45 CFR 96.125) Inappropriate use of these funds for non-primary prevention services will require repayment of SAPT Block Grant funds.

This contract and any subcontract shall meet data reporting requirements for capacity, process and outcome as required by federal grant requirements. In addition to the six Center for Substance Abuse Prevention (CSAP) strategies of Information Dissemination, Education, Alternative, Problem Identification and Referral, Community-Based Process, and Environmental, the data for the Institute of Medicine prevention categories of Universal, Selective and Indicated must be reported.

Use of the Strategic Prevention Framework (SPF) is mandatory for all counties, which became effective FY 2007-2008 and SPF-required data must be submitted via CalOMS Prevention as evidence of engagement and use of the practices. Adherence to the SPF by subcontractors is at the discretion of the subcontracting county.

- Q. Confidentiality and Security of Information
 - Contractor agrees to implement administrative, physical, and technical safeguards that reasonably and appropriately protect the confidentiality, integrity, and availability of all confidential information that it creates, receives, maintains or transmits. Contractor will provide the State with information concerning such safeguards upon request.
 - Contractor and its Subcontractors that provide services covered by this Contract shall comply with all applicable state and federal statutes and regulations regarding confidentiality, including, but not limited to, the confidentiality and security of information requirements in the following:
 - > Title 42 USC Section 290 dd-2
 - > Title 42, CFR Part 2
 - > Title 42, CFR Part 96, Sec. 96.132(e)
 - > Title 42, USC 1320d through 1320d-8
 - Title 45, CFR Parts 160, 162, and 164 the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security Rules
 - Welfare and Institutions Code (hereinafter referred to W&IC), Section 14100.2, which is specific to Medi-Cal
 - HSC Sections 11812 and 11845.5
 - ➤ HSC Sections 123110 through 123149.5 Patient Access to Health Records
 - > Title 22, California Code of Regulations (hereinafter referred to as Title 22), Section 51009, which is specific to Medi-Cal
 - Civil Code Sections 56 through 56.37 Confidentiality of Medical Information Act
 - Civil Code Section 1798.80 through 1798.82 Customer Records (breach of security)
 - Civil Code Section 1798.85 Confidentiality of Social Security Numbers
 - Contractor shall monitor compliance with the above provisions on confidentiality and security and shall include them in all subcontracts.

4. Contractor shall notify the Information Security Officer, Executive Branch, of the State within twenty-four (24) hours during a work week of any suspected or actual breach of computer system security impacting persons served by the contract, if the security breach would require notification under Civil Code Section 1798.82. Contractor agrees to materially assist the State in any action pertaining to such unauthorized disclosure required by applicable Federal or state laws.

R. Nondiscrimination in Employment and Services

1. By signing this Contract, Contractor certifies that under the laws of the United States and the State of California, incorporated into this Contract by reference and made a part hereof as if set forth in full, Contractor will not unlawfully discriminate against any person.

Federal Law Requirements:

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- ➤ Titles VI of the Civil Rights Act of 1964, as amended, prohibiting discrimination based on race, color, or national origin in federally funded programs.
- Title VIII of the Civil Rights Act of 1968 (42 USC 3601 et seq.) prohibiting discrimination on the basis of race, color, religion, sex, handicap, familial status or national origin in the sale or rental of housing.
- > Age Discrimination Act of 1975 (45 CFR Part 90), as amended (42 UC Sections 6101 6107), which prohibits discrimination on the basis of age.
- > Age Discrimination in Employment Act (29 CFR Part 1625).
- ➤ Title I of the Americans with Disabilities Act (29 CFR Part 1630) prohibiting discrimination against the disabled in employment.
- > Title II of the Americans with Disabilities Act (28 CFR Part 35) prohibiting discrimination against the disabled by public entities
- > Title III of the Americans with Disabilities Act (28 CFR Part 36) regarding access
- Section 504 of the Rehabilitation Act of 1973, as amended (29 USC Section 794), prohibiting discrimination on the basis of handicap
- Executive Order 11246 (42 USC 2000(e) et seq. and 41 CFR Part 60) regarding nondiscrimination in employment under federal contracts and construction contracts greater than \$10,000 funded by federal financial assistance
- Executive Order 13166 (67 FR 41455) to improve access to federal services for those with limited English proficiency
- > The Drug Abuse Office and Treatment Act of 1972, as amended, relating to nondiscrimination on the basis of drug abuse
- ➤ The Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism

State Law Requirements:

- ➤ Fair Employment and Housing Act (Government Code Section 12900 et seq.) and the applicable regulations promulgated thereunder (California Administrative Code, Title 2, Section 7285.0 et seq.)
- > Title 2, Division 3, Article 9.5 of the Government Code, commencing with Section 11135
- > Title 9, Division 4, Chapter 6 of the CCR, commencing with Section 10800

Contractor agrees to post, and further agrees to require its Subcontractors to post, in conspicuous places, notices available to all employees and applicants for employment setting forth the provisions of the Equal Employment Opportunity Act in conformance with Federal Executive Order No. 11246; and Section 503 of the Rehabilitation Act of 1973 (as amended). Contractor agrees to comply with provisions of the Rehabilitation Act of 1973.

For the purpose of this Contract, discrimination on the basis of race, color, creed, national origin, sex, age, or physical, sensory, cognitive, or mental disability includes, but is not limited to, the following: denying an otherwise eligible individual any service or providing a benefit which is different, or is provided in a different manner or at a different time, from that provided to others under this Contract; subjecting any otherwise eligible individual to segregation or separate treatment in any matter related to the receipt of any service; restricting an otherwise eligible individual in any way in the enjoyment of any advantage or privilege enjoyed by others receiving any service or benefit; and/or treating any individual differently from others in determining whether such individual satisfied any admission, enrollment, eligibility, membership, or other requirement or condition which individuals shall meet in order to be provided any service or benefit.

2. Contractor shall, on a cycle of at least every three years, assess, monitor, and document each Subcontractor's compliance with Section 504 of the Rehabilitation Act of 1973 (as amended) and Americans with Disabilities Act of 1990 to ensure that recipients/beneficiaries and intended recipients/beneficiaries of services are provided services without regard to physical or mental disability. Contractor shall also monitor to ensure that beneficiaries and intended beneficiaries of service are provided services without regard to race, color, creed, national origin, sex, or age.

Contractor shall include the nondiscrimination and compliance provisions of this clause in all subcontracts to perform work under this Contract. Contractor shall include nondiscrimination and compliance provisions in all subcontracts. Contractor shall establish written procedures under which

service participants are informed of their rights including their right to file a complaint alleging discrimination or a violation of their civil rights. Participants in programs funded hereunder shall be provided a copy of their rights that shall include the right of appeal and the right to be free from sexual harassment and sexual contact by members of the treatment, recovery, advisory, or consultant staff.

- No state or federal funds shall be used by the Contractor or its Subcontractors for sectarian worship, instruction, or proselytization. No state funds shall be used by the Contractor or its Subcontractors to provide direct, immediate, or substantial support to any religious activity.
- 4. Noncompliance with the requirements of nondiscrimination in services shall constitute grounds for state to withhold payments under this Contract or terminate all, or any type, of funding provided hereunder.

S. Drug-Free Workplace

Contractor shall comply, and require that its Subcontractors comply, with Government Code Section 8355 et seq. also known as Drug-Free Workplace Act of 1990. Every person or organization awarded a contract or a grant for the procurement of any property or services shall certify to the contracting or granting agency that it will provide a drug-free workplace in accordance with Government Code Section 8355.

T. No Unlawful Use or Unlawful Use Messages Regarding Drugs

Contractor agrees that information produced through these funds, and which pertains to drug- and alcohol-related programs, shall contain a clearly written statement that there shall be no unlawful use of drugs or alcohol associated with the program. Additionally, no aspect of a drug- or alcohol-related program shall include any message on the responsible use, if the use is unlawful, of drugs or alcohol (HSC Section 11999). By signing this Contract, Contractor agrees that it will enforce, and will require its Subcontractors to enforce, these requirements.

U. Smoking Prohibition Requirements

Contractor shall comply, and require that its Subcontractors comply, with Public Law 103-227, also known as the Pro-Children Act of 1994 (20 USC Section 6081, et seq.), and with California Labor Code Section 6404.5, the California Smoke-Free Workplace Law, which requires that smoking not be permitted in any portion of any indoor facility owned or leased or contracted for by an entity and used routinely or regularly for the provision of health, day care, early childhood development services, education, or library services to children under the age of 18 if the services are funded by federal programs either directly or through state or local governments, by federal grant, contract, loan, or loan guarantee. The law also

applies to children's services that are provided in indoor facilities that are constructed, operated, or maintained with such federal funds. The law does not apply to children's services provided in private residences; portions of facilities used for inpatient drug or alcohol treatment; service providers whose sole source of applicable federal funds is Medicare or Medicaid; or facilities where Women, Infants, and Children (WIC) coupons are redeemed.

V. Adherence to Computer Software Copyright Laws

Contractor certifies that it has appropriate systems and controls in place to ensure that state or federal funds available under this Contract will not be used for the acquisition, operation or maintenance of computer software in violation of copyright laws. (Reference: Executive Order D-10-99 and Department of General Services Management Memo 00-02).

W. Noncompliance with Reporting Requirements

Contractor agrees that the State has the right to withhold payments until Contractor has submitted any required data and reports to the State, as identified in Exhibit C, Document 1F, "Reporting Requirement Matrix - County Submission Requirements for the Department of Alcohol and Drug Programs."

X. Conflict of Interest

Contractor acknowledges that state laws on conflict of interest, found in the Political Reform Act, Public Contract Code Section 10365.5, and Government Code Section 1090, apply to this Contract.

Y. Disputes

Contractor shall continue to carry out its responsibilities under this Contract during any disputes.

Z. Assignment

This Contract is not assignable by the Contractor, either in whole or in part, without the consent of the State in the form of a formal written agreement.

AA. Indemnification

Contractor agrees to indemnify, defend and save harmless the Department and the State of California, its officers, agents and employees from any and all claims and losses accruing or resulting to any and all contractors, subcontractors, suppliers, laborers, and any other person, firm, or corporation furnishing or supplying work services, materials, or supplies in connection with the performance of this Contract

and from any and all claims and losses accruing or resulting to any person, firm or corporation who may be injured or damaged by the Contractor in the performance of this Contract.

BB. Independent Contractor

Contractor, and the agents and employees of the Contractor, in the performance of this Contract, shall act in an independent capacity and not as officers, employees, or agents of State.

CC. Timeliness

Time is of the essence in this Contract.

DD. Limitation on Use of Funds for Promotion of Legalization of Controlled Substances

None of the funds made available through this Contract may be used for any activity that promotes the legalization of any drug or other substance included in Schedule I of Section 202 of the Controlled Substances Act (21 USC 812).

EE. Restriction on Distribution of Sterile Needles

No funds made available through this Contract shall be used to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug.

FF. Health Insurance Portability and Accountability Act (HIPAA) of 1996

All DMC claims shall be submitted in electronic HIPAA compliant format (837P) and shall be submitted through the Department of Mental Health's Information Technology Web Service (ITWS) system. All DMC adjudicated claim information must be retrieved by the Contractor via an 835 format (Health Care Claim Payment/Advice) from ITWS. All DMC claim status inquiries must be processed through the 276 (Request for Claim Status):

The Department will return all non-HIPAA compliant DMC claims to the submitter. Returned claims will not be processed until submitted in the HIPAA compliant format; therefore, reimbursement will not be issued.

If any of the work performed under this Contract is subject to the Health Insurance Portability and Accountability Act of 1996, Public Law 104-191 (HIPAA), then Contractor shall perform the work in compliance with all applicable provisions of HIPAA. As identified in Document 3K which is referenced in Exhibit C, ADP and County shall cooperate to assure mutual agreement as to those transactions between them, to which this Provision applies. Refer to Document 3K for additional information.

The Short-Doyle Medi-Cal system has been replaced a HIPAA compliant system. All new requirements for submitting DMC claims and obtaining adjudicated DMC claim information must be met through the replaced SDMC system. Documentation will be issued of all new requirements.

1. Trading Partner Requirements

- (a) No Changes. Contractor hereby agrees that for the personal health information (Information), it will not change any definition, data condition or use of a data element or segment as proscribed in the federal HHS Transaction Standard Regulation. (45 CFR Part 162.915.(a))
- (b) No additions. Contractor hereby agrees that for the Information, it will not add any data elements or segments to the maximum data set as proscribed in the HHS Transaction Standard Regulation. (45 CFR Part 162.915 (b))
- (c) No Unauthorized Uses. Contractor hereby agrees that for the Information, it will not use any code or data elements that either are marked "not used" in the HHS Transaction's Implementation specification or are not in the HHS Transaction Standard's implementation specifications. (45 CFR Part 162.915 (c))
- (d) No Changes to Meaning or Intent. Contractor hereby agrees that for the Information, it will not change the meaning or intent of any of the HHS Transaction Standard's implementation specification. (45 CFR Part 162.915 (d))
- 2. Concurrence for Test Modifications to HHS Transaction Standards.
 Contractor agrees and understands that there exists the possibility that ADP or others may request an extension from the uses of a standard in the HHS Transaction Standards. If this occurs, Contractor agrees that it will participate in such test modifications.
- 3. Adequate Testing. Contractor is responsible to adequately test all business rules appropriate to their types and specialties. If the Contractor is acting as a clearinghouse for enrolled providers, Contractor has obligations to adequately test all business rules appropriate to each and every provider type and specialty for which they provide clearinghouse services.
- 4. Deficiencies. Contractor agrees to cure transactions errors or deficiencies identified by the State, and transactions errors or deficiencies identified by an enrolled provider if the Contractor is acting as a clearinghouse for that provider. When County is a clearinghouse, Contractor agrees to properly

communicate deficiencies and other pertinent information regarding electronic transactions to enrolled providers for which they provide clearinghouse services.

- Code Set Retention. Both Parties understand and agree to keep open code sets being processed or used in this Agreement for at least the current billing period or any appeal period, whichever is longer.
- 6. Data Transmission Log. Both Parties shall establish and maintain a Data Transmission Log, which shall record any and all Data Transmission taking place between the Parties during the term of this Contract. Each Party will take necessary and reasonable steps to ensure that such Data Transmission Logs constitute a current, accurate, complete, and unaltered record of any and all Data Transmissions between the Parties, and shall be retained by each Party for no less than twenty-four (24) months following the date of the Data Transmission. The Data Transmission Log may be maintained on computer media or other suitable means provided that, if it is necessary to do so, the information contained in the Data Transmission Log may be retrieved in a timely manner and presented in readable form.

GG. Procurement Rules

This section is applicable to all Contracts in which equipment, miscellaneous property, commodities and/or supplies are furnished by the State or expenses for said items are reimbursed with state or federal funds.

1. Equipment definitions

Wherever the term equipment and/or miscellaneous property is used, the following definitions shall apply:

(a) Major equipment: A tangible or intangible item having a base unit cost of \$5,000 or more and greater than the Contractor's or Subcontractor's capitalization level with a life expectancy of one (1) year or more and is either furnished by ADP or the cost is reimbursed through this agreement. Software and videos are examples of intangible items that meet this definition. Major equipment shall be recovered only through straight line depreciation over the class life of the property, as specified in the "Table of Class Lives and Recovery Periods" in federal IRS Publication 946, "How to Depreciate Property," which is available from any office of the IRS.

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(b) Minor equipment: A tangible item having a base unit cost of less than \$5,000 and less than the Contractor's or Subcontractor's capitalization level, with a life expectancy of one (1) year or more, and is either furnished by the State or the cost is reimbursed through this Contract.

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- Minor equipment may be reimbursed as allowable costs in the fiscal year incurred.
- (c) Miscellaneous property: A specific tangible item with a life expectancy of one (1) year or more that is either furnished by the State or the cost is reimbursed through this Contract. Examples include, but are not limited to: furniture (excluding modular furniture), cabinets, typewriters, desktop calculators, portable dictators, non-digital cameras, etc.
- 2. Government and public entities (including state colleges/universities and auxiliary organizations), whether acting as a contractor and/or subcontractor, may secure all commodities, supplies, equipment and services related to such purchases that are required in performance of this Contract. Said procurements are subject to Paragraphs 4 through 8 of this provision. Paragraph 3 of this provision shall also apply, if equipment purchases are delegated to subcontractors that are nonprofit organizations or commercial businesses.
- 3. Nonprofit organizations and commercial businesses, whether acting as a contractor and/or subcontractor, may secure commodities, supplies, equipment and services related to such purchases for performance under this Contract.
 - (a) Equipment purchases shall not exceed \$50,000 annually.
 - (b) All equipment purchases are subject to Paragraphs 4 through 8 of this provision. Paragraph 2 of this provision shall also apply, if equipment purchases are delegated to subcontractors that are either a government or public entity.
 - (c) Nonprofit organizations and commercial businesses shall use a procurement system that meets the following standards:
 - Maintain a code or standard of conduct that shall govern the performance of its officers, employees, or agents engaged in awarding procurement contracts. No employee, officer, or agent shall participate in the selection, award, or administration of a procurement contract in which, to the best of their knowledge, they have a financial interest.
 - ii Procurements shall be conducted in a manner that provides, to the maximum extent practical, open, and free competition.
 - iii Procurements shall be conducted in a manner that provides for all of the following:

- [1a] Avoid purchasing unnecessary or duplicate items.
- [2a] Equipment solicitations shall be based upon a clear and accurate description of the technical requirements of the goods to be procured.
- [3a] Take positive steps to utilize small and veteran owned businesses.
- 4. Unless waived or otherwise stipulated in writing by the State, prior written authorization from the appropriate AOD program contract manager will be required before the Contractor or Subcontractor may make a purchase of \$5,000 or more for commodities, supplies, equipment, and services related to such purchases. Contractor shall provide in its request for authorization all particulars necessary, as specified by the State, for evaluating the necessity or desirability of incurring such costs. The term "purchase" excludes the purchase of services from its Subcontractors and public utility services at rates established for uniform applicability to the general public.
- In special circumstances, determined by the State (e.g., when the State has a need to monitor certain purchases, etc.), the State may require prior written authorization and/or the submission of paid vendor receipts for any purchase, regardless of dollar amount. The State reserves the right to request repayment for any Contractor and/or its Subcontractors purchase that the State determines to be unnecessary in carrying out performance under this agreement.
- 6. Contractor and/or its Subcontractors shall maintain a copy or narrative description of the procurement system, guidelines, rules, or regulations that will be used to make purchases under this agreement. The State reserves the right to request a copy of these documents and to inspect the purchasing practices of the Contractor and/or its Subcontractors at any time.
- 7. For all purchases, Contractor and/or its Subcontractors shall maintain copies of all paid vendor invoices, documents, bids and other information used in vendor selection, for inspection or audit. All records shall be sufficient to determine the reasonableness of costs incurred by the Contractor and/or its Subcontractors and must be capable of verification by qualified auditors. Justifications supporting the absence of bidding (i.e., sole source purchases) shall also be maintained on file by the Contractor and/or its Subcontractors for inspection or audit.

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8. The State may, with cause (e.g., with reasonable suspicion of unnecessary purchases or use of inappropriate purchase practices, etc.), withhold, cancel, modify, or retract the delegated purchase authority granted under Paragraphs 2 and/or 3 of this provision by giving the Contractor no less than thirty (30) calendar days written notice.

HH. Equipment Ownership / Inventory / Disposition

This section is applicable to Contracts in which equipment and/or miscellaneous property is furnished by the State and/or when said items are purchased or reimbursed with state or federal funds. Items shall also include leased equipment, where there is an option to purchase.

 Wherever the term equipment and/or miscellaneous property is used in this provision, the definitions in the provision for Procurement Rules, Paragraph 1 shall apply.

All equipment and/or miscellaneous property that are purchased/reimbursed with Contract funds or furnished by the State under the terms of this agreement and not fully consumed in performance of this Contract shall be considered State equipment and the property of the State.

(a) The State requires the reporting, tagging, and annual inventorying of all equipment and/or miscellaneous property that is furnished by the State or purchased/reimbursed with funds provided through this Contract.

Upon receipt of equipment and/or miscellaneous property, Contractor shall report the receipt to the AOD program contract manager and receive State property tags.

- (b) If the Contractor enters into an agreement with a term of more than twelve months, Contractor shall submit an annual inventory of State equipment and/or miscellaneous property to the AOD program contract manager. Contractor shall:
 - i Include in the inventory report, equipment and/or miscellaneous property in the Contractor's possession and/or in the possession of its Subcontractor (including independent consultants).
 - ii Contact the AOD program contract manager to learn how to remove, trade-in, sell, transfer or survey off, from the inventory report, expired equipment and/or miscellaneous property that is no longer wanted, usable or has passed its life expectancy.

- When replacing equipment, the equipment to be replaced shall be used as a trade-in or the equipment shall be sold and the proceeds shall be used to offset the cost of the replacement equipment. "Replacement equipment" means equipment acquired to take the place of other equipment. To qualify as replacement equipment, the equipment shall serve the same or similar functions as the equipment replaced and must be of the same or similar nature or character, although not necessarily the same model, grade, or quality.
- 2. Title to State equipment and/or miscellaneous property shall not be affected by its incorporation or attachment to any property now owned by the State.
- 3. Unless otherwise stipulated, in writing, the State shall be under no obligation to pay the cost of restoration, or rehabilitation of the Contractors and/or its Subcontractors' facility, which may be affected by the removal of any State equipment and/or miscellaneous property.
- Contractor and/or its Subcontractors shall maintain and administer a sound business program for ensuring the proper use, maintenance, repair, protection, insurance and preservation of State equipment and/or miscellaneous property.

In administering this provision, the State may require the Contractor and/or its Subcontractors to repair or replace, to the State's satisfaction, any damaged, lost or stolen state equipment and/or miscellaneous property. Should a theft occur, Contractor and/or its Subcontractors shall immediately file a theft report with the appropriate police agency or the California Highway Patrol and the Contractor shall promptly submit one copy of the theft report to the AOD program contract manager.

- 5. Unless otherwise stipulated by the program funding this Contract, equipment and/or miscellaneous property purchased/reimbursed with Contract funds or furnished by the State under the terms of this Contract, shall only be used for performance of this Contract or another State Contract.
- 6. Within sixty (60) calendar days prior to the termination or end of this agreement, Contractor shall provide a final inventory report of equipment and/or miscellaneous property to the AOD program contract manager and shall, at that time, query the State as to the requirements, including the manner and method, of returning State equipment and/or miscellaneous property to the State. Final disposition of equipment and/or miscellaneous property shall be at the State expense and according to the State instructions. Equipment and/or miscellaneous property disposition instructions shall be issued by the State immediately after receipt of the final inventory report. At the termination or conclusion of this agreement, the

State may at its discretion, authorize the continued use of state equipment and/or miscellaneous property for performance of work under a different State agreement.

7. Motor Vehicles

This section is applicable only if motor vehicles are purchased/reimbursed with agreement funds or furnished by the State under this agreement.

- (a) If motor vehicles are purchased/reimbursed with agreement funds or furnished by the State under the terms of this agreement, within thirty (30) calendar days prior to the termination or end of this agreement, Contractor and/or its Subcontractors shall return such vehicles to the State and shall deliver all necessary documents of title or registration to enable the proper transfer of a marketable title to the State.
- (b) If motor vehicles are purchased/reimbursed with agreement funds or furnished by the State under the terms of this agreement, the State of California shall be the legal owner of said motor vehicles and the Contractor shall be the registered owner. Contractor and/or its Subcontractors may only use said vehicles for performance and under the terms of this agreement.
- (c) Contractor and/or its Subcontractors agree that all operators of motor vehicles, purchased/reimbursed with agreement funds or furnished by ADP under the terms of this agreement, shall hold a valid state of California driver's license. In the event that ten or more passengers are to be transported in any one vehicle, the operator shall also hold a State of California Class B driver's license.
- (d) If any motor vehicle is purchased/reimbursed with agreement funds or furnished by the State under the terms of this agreement, Contractor and/or its Subcontractors, as applicable, shall provide, maintain, and certify that, at a minimum, the following type and amount of automobile liability insurance is in effect during the term of this agreement or any period of contract extension during which any vehicle remains in the Contractor's and/or its Subcontractor's possession.

8. Automobile Liability Insurance

(a) Contractor, by signing this Contract, hereby certifies that it possesses or will obtain automobile liability insurance in the amount of \$1,000,000 per occurrence for bodily injury and property damage combined or has a program of adequate self-insurance. Said insurance shall be obtained and made effective upon the delivery date

- of any motor vehicle, purchased/reimbursed with agreement funds or furnished by the State under the terms of this agreement to the Contractor and/or its Subcontractors.
- (b) Contractor shall maintain a copy of the certificate of insurance or a letter of self-insurance which must be made available to the State upon request. Subcontractors shall maintain a copy of the certificate of insurance which shall be made available to the State upon request.
- (c) Contractor agrees that bodily injury and property damage liability insurance or a program of self-insurance, as required herein, shall remain in effect at all times during the term of this agreement or until such time as the motor vehicle is returned to the State. Subcontractors agree that bodily injury and property damage liability insurance as required herein, shall remain in effect at all times during the term of this agreement or until such time as the motor vehicle is returned to the State.
- (d) Contractor and/or its Subcontractors agree to provide, at least thirty (30 days) prior to the expiration date of said insurance coverage, a copy of a new certificate or insurance evidencing continued coverage, as indicated herein, for not less than the remainder of the term of this agreement, the term of any extension or continuation thereof, or for a period of not less than one (1) year.
- (e) Contractor and/or its Subcontractors, if not a self-insured government and/or public entity, shall provide evidence, that any required certificates of insurance contain the following provisions:
 - i The insurer will not cancel the insured's coverage without giving thirty (30) calendar days prior written notice to the State.
 - ii The State of California, it's officers, agents, employees, and servants are included as additional insured's, but only with respect to work performed for the State under this agreement and any extension or continuation of this agreement.
 - The insurance carrier shall notify the State of California
 Department of Alcohol and Drug Programs, in writing, of the
 Contractor's failure to pay premiums; its cancellation of such
 policies; or any other substantial change, including, but not
 limited to, the status, coverage, or scope of the required
 insurance. Such notices shall contain a reference to the
 Contract number for which the insurance was obtained.

- (f) Contractor and/or its Subcontractors are hereby advised that copies of certificates of insurance may be subject to review and approval by the Department of General Services (DGS), Office of Risk and Insurance Management. The Contractor shall be notified by the State, in writing, if this provision is applicable to this agreement. If DGS approval of the certificate of insurance is required, Contractor agrees that no work or services involving the motor vehicle shall be performed prior to obtaining said approval.
- (g) In the event the Contractor and/or its Subcontractors fail to keep insurance coverage, as required herein, in effect at all times during vehicle possession, the State may, in addition to any other remedies it may have, terminate this agreement upon the occurrence of such event.

II. Site Inspection

The State, through any authorized representatives, has the right at all reasonable times to inspect or otherwise evaluate the work performed or being performed hereunder including subcontract supported activities and the premises in which it is being performed. If any inspection or evaluation is made of the premises of the Contractor or its Subcontractors, the Contractor shall provide and shall require its Subcontractors to provide all reasonable facilities and assistance for the safety and convenience of the authorized representatives in the performance of their duties. All inspections and evaluations shall be performed in such a manner as will not unduly delay the work.

- JJ. California Outcomes Measurement System (CalOMS) for Treatment (CalOMS Tx) and for Prevention (CalOMS Pv).
 - 1. The Contractor shall:
 - (a) Conduct information technology (IT) systems testing and pass State certification testing before commencing submission of CalOMS Tx data. If the Contractor subcontracts with vendor for IT services, Contractor is responsible for ensuring that the subcontracted IT system is tested and certified by the State prior to submitting CalOMS Tx data. If contractor changes or modifies the CalOMS Tx IT system, then contractor shall re-test and pass state certification prior to submitting data from new or modified system. Contractor must comply with ADP compliance requirements for data content, data quality, data completeness, reporting frequency, reporting deadlines, and report method.

- (b) Participate in CalOMS informational meetings, training, and readiness meetings for both CalOMS Tx and CalOMS Pv.
- (c) Implement and maintain a system for collecting and electronically submitting data for CalOMS Tx.
- (d) Meet the requirements in the Privacy, Confidentiality and Information Security Provisions as outlined in Document 3K (as identified in Exhibit C).
- The following business rules for the electronic submission of CalOMS Tx and CalOMS Pv data are:
 - (a) Prevention service/activity data is to be reported via CalOMS Pv by all funded primary prevention providers. Services are to be reported by the date of occurrence on a weekly basis. No more than one week's data shall be aggregated into one reported service.
 - (b) All CalOMS Pv service/activity data shall be reviewed by each county and released to the State no later than the end of the first month following the close of each quarter. The reporting quarters are: July through September, October through December, January through March, and April through June.
 - (c) Reporting progress on prevention goals and objectives via the Evaluation Module within CalOMS Pv shall be done on an annual basis. This information is due no later than August 31 of each fiscal year.
 - (d) Electronic submission of CalOMS Tx data is due 45 days from the end of the last day of the report month.
 - (e) If the Contractor cannot submit GalOMS Pv data by the established due dates, the Contractor shall submit a written request for an extension. The written request shall be approved by the State prior to the established due date.

- (f) If the Contractor experiences system or service failure or other extraordinary circumstances that affect its ability to timely submit CalOMS Tx and/or CalOMS Pv data, and/or to meet other CalOMS Tx and CalOMS Pv data compliance requirements, the Contractor shall report the problem in writing before the established data submission deadlines. The written notice shall include a remediation plan that is subject to review and approval by the State. A grace period of up to sixty (60) days may be granted, at the State's sole discretion, for the Contractor to resolve the problem before NNA payments are withheld.
- (g) If the State experiences system or service failure, no penalties will be assessed to Contractor for late data submission.
- (h) Contractor shall comply with the treatment and prevention data quality standards established by the State. Failure to meet these standards on an ongoing basis may result in withholding NNA funds.
- (i) If the Contractor submits data after the established deadlines, due to a delay or problem, Contractor is still responsible for collecting and reporting data from time of delay or problem.

KK. Drug and Treatment Access Report (DATAR)

1. The Contractor shall:

- (a) Be responsible for ensuring that all treatment providers with whom Contractor makes a contract or otherwise pays for the services, and who are required to report CalOMS Treatment client data, submit a monthly DATAR report in an electronic copy format as provided by the State.
- (b) Ensure that all DATAR reports are submitted to the State by the 10th of the month following the report activity month.
- (c) Ensure that all applicable providers are enrolled in the State's webbased DATARWeb program for submission of data, accessible on the ADP website.
- (d) In those instances where the Contractor maintains, either directly or indirectly, a central intake unit or equivalent which provides intake services including a waiting list, the Contractor shall identify and begin submitting monthly DATAR reports for the central intake unit by a date to be specified by the State.

- (e) If the Contractor experiences system or service failure or other extraordinary circumstances that affect its ability to timely submit a monthly DATAR report, and/or to meet data compliance requirements, the Contractor shall report the problem in writing before the established data submission deadlines. The written notice shall include a remediation plan that is subject to review and approval by the State. A grace period of up to sixty (60) days may be granted, at the State's sole discretion, for the Contractor to resolve the problem before NNA payments are withheld.
- (f) If the State experiences system or service failure, no penalties will be assessed to Contractor for late data submission.

2. Noncompliance Provision

The Contractor shall be considered compliant if a minimum of 95% of required DATAR reports from the Contractor's treatment providers are received by the due date.

LL. Domestic Partners Act

Pursuant to Public Contract Code 10295.3, no state agency may enter into any contract executed or amended after January 1, 2007, for the acquisition of goods or services in the amount of \$100,000 or more with a contractor who, in the provision of benefits, discriminates between employees with spouses and employees with domestic partners, or discriminates between domestic partners and spouses of those employees.

MM. Nondiscrimination and Institutional Safeguards for Religious Providers

Contractor shall establish such processes and procedures as necessary to comply with the provisions of Title 42, USC, Section 300x-65 and Title 42, CFR, Part 54, (Reference Document 1B).

NN. Force Majeure

Neither party shall be responsible for delays or failures in performance resulting from acts beyond the control of the offending party. Such acts shall include but not be limited to acts of God, fire, flood, earthquake, other natural disaster, nuclear accident, strike, lockout, riot, freight, embargo, public related utility, or governmental statutes or regulations super-imposed after the fact. If a delay or failure in performance by the Contractor arises out of a default of its Subcontractor, and if such default of its Subcontractor, arises out of causes beyond the control of both the Contractor and Subcontractor, and without the fault or negligence of either of them, the Contractor shall not be liable for damages of such delay or failure, unless

the supplies or services to be furnished by the Subcontractor were obtainable from other sources in sufficient time to permit the Contractor to meet the required performance schedule.

OO. Counselor Certification

Any individual providing intake, assessment of need for services, treatment or recovery planning, individual or group counseling to participants, patients, or residents in an ADP licensed or certified program is required to be certified as defined in Title 9, CCR, Division 4, Chapter 8. (Document 3H)

PP. Limited English Proficiency

To ensure equal access to quality care by diverse populations, every treatment provider receiving funds from this contract shall:

- Promote and support the attitudes, behaviors, knowledge, and skills
 necessary for staff to work respectfully and effectively with clients and each
 other in a culturally diverse work environment.
- 2. Have a comprehensive management strategy to address culturally and linguistically appropriate services, including strategic goals, plans, policies, procedures, and designated staff responsible for implementation.
- Develop and implement a strategy to recruit, retain and promote qualified, diverse and culturally competent administrative, clinical, and support staff that are trained and qualified to address the needs of the racial and ethnic communities being served.
- Require and arrange for ongoing education and training for administrative, clinical, and support staff in culturally and linguistically competent service delivery.
- Provide all clients with limited English proficiency access to bilingual staff or interpretation services.
- 6. Provide oral and written notices, including translated signage at key points of contact, to clients in their primary language informing them of their right to receive no-cost interpreter services.
- 7. Translate and make available signage and commonly-used written client educational material and other materials for members of the predominant language groups in the service area.
- 8. Ensure that interpreters and bilingual staff can demonstrate bilingual proficiency and receive training that includes the skills and ethics of

interpreting, and knowledge in both languages of the terms and concepts relevant to clinical or non-clinical encounters. Family or friends are not considered adequate substitutes because they usually lack these abilities.

- Ensure that the clients' primary spoken language and self-identified race/ethricity are included in the provider's management information system as well as any client records used by provider staff.
- 10. Implement the Limited English Proficiency (LEP) Policy Guidance for recipients of funds from the federal Health and Human Services Agency at http://www.usdoj.gov/crt/cor/lep/hhsrevisedlepguidance.html. Additional information and resources for serving persons with LEP can be accessed at http://www.lep.gov/.

QQ. Intravenous Drug Use (IVDU) Treatment

Contractor shall ensure that individuals in need of IVDU treatment shall be encouraged to undergo AOD treatment (42 USC 300x-23(b) of PHS Act).

RR. Tuberculosis Treatment

Contractor shall ensure the following related to Tuberculosis (TB):

- 1. Routinely make available TB services to each individual receiving treatment for alcohol and other drug use and/or abuse;
- 2. Reduce barriers to patients' accepting TB treatment; and,
- 3. Develop strategies to improve follow-up monitoring, particularly after patients leave treatment, by disseminating information through educational bulletins and technical assistance.

SS. Trafficking Victims Protection Act of 2000

Contractor and its Subcontractors that provide services covered by this Contract shall comply with Section 106(g) of the Trafficking Victims Protection Act of 2000 as amended (22 U.S.C. 7104). For full text of the award term, go to: http://www.samhsa.gov/grants/trafficking.aspx

TT. Subcontract Provisions

Contractor shall include all the foregoing provisions in all of its subcontracts.

UU. Participation of County Alcohol and Drug Program Administrators Association of California (CADPAAC) Members

Pursuant to HSC Section 11801(k), the alcohol and drug program administrator shall participate and represent the county in meetings of the CADPAAC for the purposes of representing the counties in their relationship with the state with respect to policies, standards, and administration for alcohol and other drug abuse services.

Pursuant to HSC Section 11811.6(b), the county alcohol and drug program administrator shall attend any special meetings called by the Director of ADP.

NEGOTIATED NET AMOUNT

ARTICLE I. FORMATION AND PURPOSE

A. Authority

State and the Contractor enter into Exhibit C by authority of Chapter 3 of Part 1, Division 10.5 of the Health and Safety Code (HSC) and with approval of Contractor's County Board of Supervisors (or designee) for the purpose of providing alcohol and drug services, which will be reimbursed pursuant to Exhibit C. State and the Contractor identified in the Standard Agreement are the only parties to this Contract. This Contract is not intended, nor shall it be construed, to confer rights on any third party.

B. Control Requirements

- 1. Performance under the terms of Exhibit C is subject to all applicable federal and state laws, regulations, and standards. In accepting the State drug and alcohol combined program allocation pursuant to HSC Sections 11814(a) and (b), Contractor shall: (i) establish, and shall require its Subcontractors to establish, written procedures consistent with the following requirements; (ii) monitor for compliance with the written procedures; and (iii) be held accountable for audit exceptions taken by the State against the Contractor and its Subcontractors for any failure to comply with these requirements:
 - (a) HSC, Division 10.5, commencing with Section 11760;
 - (b) Title 9, California Code of Regulations (CCR) (herein referred to as Title 9), Division 4, commencing with Section 9000;
 - (c) Government Code Section 16367.8;
 - (d) Government Code, Article 7, Federally Mandated Audits of Block Grant Funds Allocated to Local Agencies, Chapter 1, Part 1, Division 2, Title 5, commencing at Section 53130;
 - (e) Title 42 United State Code (USC), Sections 300x-21 through 300x-31, 300x-34, 300x-53, 300x-57, and 330x-65 and 66;
 - (f) The Single Audit Act Amendments of 1996 (Title 31, USC Sections 7501-7507) and the Office of Management and Budget (OMB) Circular A-133 revised June 27, 2003;
 - (g) Title 45, Code of Federal Regulations (CFR), Sections 96.30 through 96.33 and Sections 96.120 through 96.137;
 - (h) Title 42, CFR, Sections 8.1 through 8.34;
 - (i) Title 21, CFR, Sections 1301.01 through 1301.93, Department of

Justice, Controlled Substances; and,

(j) State Administrative Manual (SAM), Chapter 7200 (General Outline of Procedures).

Contractor shall be familiar with the above laws, regulations, and guidance and shall assure that its Subcontractors are also familiar with such requirements.

- 2. The provisions of Exhibit C are not intended to abrogate any provisions of law or regulation, or any standards existing or enacted during the term of this Contract.
- 3. Contractor shall adhere to the applicable provisions of Title 45, CFR, Part 96, Subparts C and L, as applicable, in the expenditure of the Substance Abuse Prevention and Treatment (SAPT) Block Grant funds. Document 1A, 45 CFR 96, Subparts C and L, is incorporated by reference.
- 4. This Contract is subject to any additional restrictions, limitations, or conditions enacted by the federal or state government that affect the provisions, terms, or funding of this Contract in any manner.
- 5. Documents 1C, 1D(a), and 1D(b), incorporated by this reference, contain additional requirements that shall be adhered to by those Contractors that receive the types of funds specified by each document. These exhibits and documents are:
 - (a) Exhibit A1;
 - (b) Document 1C, Driving-Under-the-Influence Program Requirements;
 - (c) Document 1D(a), Services to California Department of Corrections and Rehabilitation (CDCR) Parolee Services Network (PSN); and,
 - (d) Document 1D(b), SAPT Female Offender Treatment Project (FOTP).
- Contractor shall comply with the requirements contained in Document 1F, incorporated by this reference, "Reporting Requirement Matrix" – County Submission Requirements for the Department of Alcohol and Drug Programs."
- 7. Contractor shall comply with the requirements for perinatal programs funded under Exhibit C contained in Document 1G, incorporated by this reference, "Perinatal Services Network Guidelines 2009" until such time new Perinatal Services Network Guidelines are established and adopted. No formal amendment of this contract is required for new guidelines to apply.

- 8. In accordance with the Fiscal Year 2009-10 State Budget Act, contractors that receive Women and Children's Residential Treatment Perinatal State General funds shall comply with the program requirements (Section 2.5, Required Supplemental/Recovery Support Services) of the Substance Abuse and Mental Health Services Administration's Grant Program for Residential Treatment for Pregnant and Postpartum Women, RFA found at http://www.samhsa.gov/Grants/2008/ti-08-009.doc.
- 9. Contractor should follow the guidelines in Document 1V, incorporated by this reference, "Youth Treatment Guidelines," in developing and implementing youth treatment programs funded under Exhibit C, until such time new Youth Treatment Guidelines are established and adopted. No formal amendment of this contract is required for new guidelines to apply.

C. Contract Negotiation

Contract negotiations may be conducted between the Contractor and the State through their authorized representative(s) each year of the multi-year contract period. Negotiations may be conducted at ADP, 1700 K Street, Sacramento, California, 95811 once during the multi-year contract period. In the alternative, negotiations may be conducted by correspondence.

ARTICLE II. DEFINITIONS

- A. The words and terms of this Contract are intended to have their usual meanings unless a particular or more limited meaning is associated with their usage pursuant to Division 10.5 of HSC, Section 11750 et seq., and Title 9, CCR, Section 9000 et seq. The following definitions shall apply to Exhibit C:
 - "Available Capacity" means the total number of units of service (bed days, hours, slots, etc.) that a Contractor actually makes available in the current fiscal year.
 - "Contractor" means (a) the county identified in the Standard Agreement or (b) the department authorized by the County Board of Supervisors to administer alcohol and drug programs.
 - "Dedicated Capacity" means the historically calculated service capacity, by modality, adjusted for the projected expansion or reduction in services, which the Contractor agrees to make available to provide non-Drug Medi-Cal (DMC) drug and alcohol services to persons eligible for Contractor services.
 - 4. "Encumbered Amount" means the amount reflected on the Standard Agreement of this Contract and supported by Exhibit A1 as the Negotiated Net Amount (NNA).
 - 5. **"Final Allocation"** means the amount of funds identified in the last allocation letter issued by State for the current fiscal year.
 - 6. "Final Settlement" means permanent settlement of the Contractor's actual allowable costs or expenditures as determined at the time of audit, which shall be completed within three years of the date the year-end cost settlement report was accepted for interim settlement by the State. If the audit is not completed within three years, the interim settlement shall be considered as the final settlement.
 - 7. "Interim Settlement" means temporary settlement of actual allowable costs or expenditures reflected in the Contractor's year-end cost settlement report.
 - "Modality" means those necessary overall general service activities to provide alcohol and/or drug prevention or treatment that conform to the services described in Division 10.5 of the HSC.
 - 9. "Negotiated Net Amount" means the contracted amount of funds for services agreed to by the State and the Contractor, less funds budgeted for DMC. The net amount reflects only those funds allocated to the Contractor by the State and the required county match for State General Funds (SGF). The NNA does not include other revenue budgeted by the Contractor such as client fees or revenue in excess of the required match for SGF. The cost

per unit for the dedicated capacity to be provided for each service modality identified in the Contract will be based on the net amount of the contract.

- "Performance" means providing the dedicated capacity in accordance with Exhibit A1 and abiding by the terms of Exhibits B and C of this Contract, including all applicable state and federal statutes, regulations, and standards, including Alcohol and/or Other Drug Certification Standards (Document 1P), in expending funds for the provision of alcohol and drug services hereunder.
- 11. **"Preliminary Settlement"** means the settlement of only SAPT and SGF discretionary funding.
- 12. "Revenue" means Contractor's income from sources other than the State allocation and the required county match.
- 13. "Service Element" is the specific type of service performed within the more general service modalities. A list of the service modalities and service elements and service elements codes is incorporated into this Contract as Document 1H(a) "Service Code Descriptions," and Document 1H(b), "Program Code Listing."
- 14. "State" means the California Department of Alcohol and Drug Programs.
- 15. "Unit of Service" means the type of unit used to quantify the service modalities/elements in the dedicated capacity reports. The units of services are listed below:

Support Services	staff hours
Primary Prevention Services	N/A
Secondary Prevention Services	staff hours
Nonresidential Services (Outpatient and Aftercare)	staff hours
Intensive Outpatient Services (Day Care	visit days
Rehabilitative)	
Residential Treatment Services	bed days
Narcotic Treatment Program	•
Inpatient Detoxification	bed days
Outpatient Detoxification	sĺot days
Narcotic Replacement Therapy	slot days
Methadone	
Ancillary Services	staff hours
Driving Under-the-Influence	persons served

16. **"Utilization"** means the total actual units of service used by clients and participants.

ARTICLE III. FISCAL PROVISIONS

A. Funding Authorization

- Exhibit C is valid and enforceable subject to sufficient funds being made available to the State by the United States Government and subject to authorization and appropriation of sufficient funds pursuant to the State's Budget Act.
- In the event the United States Government and/or the State Government do not authorize and appropriate sufficient funds for the State to allocate amounts pursuant to the Payment Provisions of Exhibit C, it is mutually agreed that the Contract shall be amended to reflect any reduction in the Payment Provisions and the Performance Provisions.
- Contractor shall bear the financial risk in providing any alcohol and/or drug services covered by this Exhibit C.

B. Payment Provisions

- 1. For each fiscal year, the total amount payable by the State to the Contractor under Exhibit C shall not exceed the encumbered amount. The funds identified for the fiscal years covered by Exhibit C are subject to change depending on the availability and amount of funds appropriated by the Legislature and the Federal Government. The amount of funds available for expenditure by the Contractor shall be limited to the amount identified in the final allocations issued by the State for that fiscal year or the NNA, whichever is less. Changes to encumbered funds will require written amendment to the Contract. State may settle costs for NNA services based on the year-end cost settlement report as the final amendment to the approved single state/county contract.
- 2. In the event a contract amendment is required pursuant to the preceding paragraph, Contractor shall submit to the State information as identified in Exhibit B, Section F(4)(a). To the extent the Contractor is notified of the State Budget Act allocation prior to the execution of the Contract, the State and the Contractor may agree to amend the contract after the issuance of the first revised allocation.
- State shall reimburse the Contractor monthly in arrears an amount equal to one-twelfth of the amount encumbered for the NNA portion of the approved contract (Exhibit C) or the most recent allocation based on the Budget Act Allocation, whichever is less.

However, based on the expenditure information submitted by the counties in the Quarterly Federal Financial Management Report (QFFMR), State may adjust monthly payments of encumbered federal funds to extend the length of time (not to exceed 21 months) over which payments of federal funds will be made.

4. Monthly disbursements to the Contractor at the beginning of each fiscal year of the Contract shall be based on the preliminary allocation of funds, as detailed in Exhibit A1.

Final allocations will reflect any increases or reductions in the appropriations as reflected in the Budget Act Allocation and any subsequent allocation revisions. To the extent that any amendment encumbers an amount that is less than the Budget Act Allocation, the monthly disbursements will reflect the lesser amount.

5. State may withhold monthly payments if the Contractor fails to timely submit reports and data required by the State, including but not limited to, reports required pursuant to Exhibit C, Article V. Upon the State's receipt of the complete and accurate reports, or data, Contractor's monthly payment shall commence with the next scheduled monthly payment, and shall include any funds withheld due to late submission of reports or data.

State may withhold monthly payments if the Contractor fails to submit the contract amendment, within 90 days from issuance from the State to the Contractor.

6. Adjustments may be made to the total NNA of the Contract and amounts may be withheld from payments otherwise due to the Contractor hereunder, for nonperformance to the extent that nonperformance involves fraud, abuse, or failure to achieve the objectives of the provisions of Exhibit C.

C. Accrual of Interest

Any interest accrued from State-allocated SGF and retained by the Contractor must be used for the same purpose as the State-allocated SGF from which the interest was accrued.

D. Additional Audit Requirements

 Pursuant to OMB Circular A-133, Contractor shall require and ensure that, effective January 1, 2004, its non-profit Subcontractors expending \$500,000 or more in federal funds in a fiscal year, have a single or program-specific audit performed with respect to the funds covered by Exhibit C.

- (a) The audit shall be performed in accordance with OMB Circular A-133 (Revised June 2003), entitled "Audits of States, Local Governments, and Non-Profit Organizations." OMB Circulars can be obtained from the Office of Management and Budget, Washington, D.C. 20503, or www.whitehouse.gov/omb/circulars/index.html.
- (b) The audit shall be conducted in accordance with generally accepted auditing standards and Government Auditing Standards, 2007 Revision, issued by the Comptroller General of the United States. The Government Auditing Standards can be obtained from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402, or www.gao.gov.
- (c) A copy of the audit performed in accordance with OMB Circular A-133 (Revised June 2003) shall be submitted to the State within 30 days of completion, but no later than nine months following the end of the Subcontractor's fiscal year.
- (d) The cost of the audit made in accordance with the provisions of the most recent version of OMB Circular A-133 can be charged to applicable federal awards. Where apportionment of the audit cost is necessary, such apportionment shall be made in accordance with generally accepted accounting principles, but shall not exceed the proportionate amount that the award represents of the Subcontractor's total revenue.
- (e) The work papers and the audit reports shall be retained for a minimum of three years from the date of the audit reports, and longer if the independent auditor is notified in writing by the State to extend the retention period.
- (f) Audit work papers shall be made available upon request to the State, and copies shall be made as is reasonable and necessary.
- (g) Contractor, in coordination with the State, shall ensure that its Subcontractor's follow-up and take all necessary corrective action on any audit findings in the single or program-specific audit report.
- Pursuant to OMB Circular A-133, State may impose sanctions against the Contractor for not submitting required single or program-specific audit reports, or failure to comply with all other audit requirements. The sanctions shall include:
 - (a) Withholding a percentage of federal awards until the audit is completed satisfactorily;
 - (b) Withholding or disallowing overhead costs;

- (c) Suspending federal awards until the audit is conducted; or,
- (d) Terminating the federal award.

E. Contractor Monitoring Requirements

- 1. Pursuant to OMB Circular A-133 §____.400(d)(3), Contractor shall monitor the activities of all its non-profit Subcontractors to ensure that:
 - Subcontractors are complying with program requirements and achieving performance goals.
 - Subcontractors are complying with fiscal requirements, such as having appropriate fiscal controls in place, and are using awards for authorized purposes.

Contractor can use a variety of monitoring mechanisms, including limited scope audits, on-site visits, progress reports, financial reports, and reviews of documentation supporting requests for reimbursement, to meet the Contractor's monitoring objectives. The Contractor may charge federal awards for the cost of these monitoring procedures as outlined in OMB Circular A-133.

The Contractor shall submit to the State a copy of the procedures and any other monitoring mechanism used to monitor non-profit Subcontractors at the time of the County's annual site visit or within 60 days thereafter. Contractor shall state the frequency that non-profit Subcontractors are monitored.

- (a) Limited scope audits, as defined in the OMB Circular A-133, only include agreed-upon engagements that are (1) conducted in accordance with either the American Institute of Certified Public Accountant's generally accepted auditing standards or attestation standards; (2) paid for and arranged by pass-through entities (counties); and (3) address one or more of the following types of compliance requirements: (i) activities allowed or unallowed; (ii) allowable costs/cost principles; (iii) eligibility; (iv) matching, level of effort and earmarking; and (v) reporting.
- (b) On-site visits focus on compliance and controls over compliance areas. The reviewer must make site visits to the subcontractor location(s), and can use a variety of monitoring mechanisms to document compliance requirements. The findings and the corrective action will require follow-up by the Contractor.
- Reports of audits conducted by the State shall reflect all findings, recommendations, adjustments, and corrective action as a result of its findings in any areas.
- 3. Contractor shall be responsible for any disallowance taken by the Federal

Government, the State, or the Bureau of State Audits, as a result of any audit exception that is related to the Contractor's responsibilities herein. Contractor shall not use funds administered by the State to repay one federal funding source with funds provided by another federal funding source, to repay federal funds with state funds, or to repay state funds with federal funds. State shall invoice Contractor 60 days after issuing the final audit report or upon resolution of an audit appeal. Contractor agrees to develop and implement any corrective action plans in a manner acceptable to State in order to comply with recommendations contained in any audit report. Such corrective action plans shall include time-specific objectives to allow for measurement of progress and are subject to verification by the State within one year from the date of the plan.

If differences cannot be resolved between the State and the Contractor regarding the terms of the final financial audit settlements for funds expended under Exhibit C, Contractor may request an appeal in accordance with the appeal process described in Document 1J(a), "NNA Audit Appeal Process," incorporated by this reference. When a financial audit is conducted by the Federal Government, the State, or the Bureau of State Audits directly with a Subcontractor of the Contractor, and if the Subcontractor disagrees with audit disallowances related to its programs, claims or services, Contractor shall, at the Subcontractor's request, request an appeal to the State in accordance with Document 1J(a). Contractor shall include a provision in its subcontracts regarding the process by which its Subcontractors may file an audit appeal via the Contractor.

Contractors that conduct financial audits of Subcontractors, other than a Subcontractor whose funding consists entirely of non-Department funds, shall develop a process to resolve disputed financial findings and notify Subcontractors of their appeal rights pursuant to that process. This section shall not apply to those grievances or complaints arising from the financial findings of an audit or examination made by or on behalf of the State pursuant to Article IV of this Contract.

F. Revenue Collection

Contractor shall conform to revenue collection requirements in Division 10.5 of the HSC, Sections 11841, by raising revenues in addition to the funds allocated by the State. These revenues include, but are not limited to, fees for services, private contributions, grants, or other governmental funds. These revenues shall be used in support of additional alcohol and other drug services or facilities. Each alcohol and drug program shall set and collect client fees based on the client's ability to pay. The fee requirement shall not apply to prevention and early intervention services. Contractor shall identify in its annual cost report the types and amounts of revenues collected.

G. County Match Requirements

Contractor shall comply with the following requirements pursuant to HSC, Sections 11840 and 11840.1.

- 1. Counties with populations over 100,000:
 - (a) Non-DMC SGF allocations shall be funded on the basis of 90 percent SGF and 10 percent county funds, except local hospital inpatient costs to the extent there are allocations made for local hospital inpatient costs, which shall be funded on a basis of 85 percent SGF and 15 percent county funds; and,
 - (b) State Hospital programs shall be funded on the basis of 85 percent SGF and 15 percent County funds.
- 2. Perinatal Services Network counties with populations over 100,000:

Perinatal Services Network programs shall be funded on the basis of 90 percent Perinatal State General Fund (PSGF) and 10 percent county funds. The 10 percent county funds match to PSGF funds must be used for perinatal-related activities. The 10 percent county match requirement does not apply to the Women and Children's Residential Treatment Services funds.

3. Counties with populations under 100,000:

Non-DMC SGF, non-DMC PSGF, and Women and Children's Residential Treatment SGF allocations do not require a county fund match, with the exception of State Hospital programs, which shall be funded on the basis of 90 percent SGF and 10 percent county funds to the extent that allocations of SGF are made available for such programs.

Gost Efficiencies

1. It is intended that the cost to the Contractor in maintaining the dedicated capacity and units of service shall be met by the NNA allocated to the Contractor and other Contractor or Subcontractor revenues. Amounts awarded pursuant to Exhibit C shall not be used for services where payment has been made, or can reasonably be expected to be made under any other state or federal compensation or benefits program, or where services can be paid for from revenues.

- Pursuant to HSC, Sections 11758.12 (e), unexpended discretionary SGF provided through this Contract shall be treated as follows:
 - (a) Contractor shall include any non-DMC SGF, non-DMC PSGF, and Women and Children's Residential Treatment SGF funds redirected from the current fiscal year to the next fiscal year plus any accrued interest, (see Article III, Section C) on the identified lines on the subsequent fiscal year cost report.
 - (b) Unspent non-DMC SGF, non-DMC PSGF, and Women and Children's Residential Treatment SGF funds may be retained by the Contractor, less:
 - i Amounts reimbursable to the CDCR pursuant to Document 1D(a);
 - ii Amounts deemed necessary by the Contractor to fund allowable DMC costs that exceed DMC maximum rates.
 - (c) Retained non-DMC SGF, non-DMC PSGF, and Women and Children's Residential Treatment SGF funds shall only be spent on identified drug and alcohol service priorities in accordance with this Contract and shall be included on the identified lines on the subsequent fiscal year cost report.

I. Expenditure of SAPT Block Grant Funds

- 1. SAPT Block Grant funds are allocated based upon the Federal Grant award period. These funds must be expended for activities authorized pursuant to 42 USC Sections 300x-21(b) through 300x-66; and Title 45, CFR, Subpart L, within the availability period of the grant award. Any SAPT Block Grant funds that have not been expended by a Contractor at the end of the expenditure period identified below shall be returned to the State for subsequent return to the Federal government.
 - (a) For SFY 2009-10, the expenditure period of the FFY 2009 award is October 1, 2008, through June 30, 2010.
 - (b) For SFY 2010-11, the expenditure period of the FFY 2010 award is October 1, 2009, through June 30, 2011.
 - (c) For SFY 2011-12, the expenditure period of the FFY 2011 award is October 1, 2010 through June 30, 2012.
- 2. Contractors receiving SAPT Block Grant funds shall comply with the financial management standards contained in Title 45, CFR, Part 92, Sections 92.20(b)(1) through (6), and Title 45, CFR, Part 96, Section 96.30.

- 3. Non-profit Subcontractors receiving SAPT Block Grant funds shall comply with the financial management standards contained in Title 45, CFR, Part 74, Sections 74.21(b)(1) through (4) and (b)(7), and Part 96, Section 96.30.
- 4. Contractors receiving SAPT Block Grant funds shall track obligations and expenditures by individual SAPT Block Grant award, including, but not limited to, obligations and expenditures for primary prevention, services to pregnant women and women with dependent children, and HIV early intervention services. "Obligation" shall have the same meaning as used in Title 45, CFR, Part 92, Section 92.3.
- 5. Contractors and Subcontractors receiving Substance Abuse Treatment Trust Fund (SATTF) funds shall comply with the financial management standards Contained in Title 9, CCR, Sections 9535(c), (d), (e), and (f).

ARTICLE IV. PERFORMANCE PROVISIONS

A. Monitoring

- Contractor's performance under Exhibit C shall be monitored by the State during the term of this Contract. Monitoring criteria shall include, but not be limited to:
 - (a) Whether the quantity of work or services being performed conforms to Exhibit A1;
 - (b) Whether the Contractor has established and is monitoring appropriate quality standards;
 - (c) Whether the Contractor is abiding by all the terms and requirements of this Contract; and,
 - (d) Whether the Contractor is abiding by the terms of the Perinatal Services Network Guidelines (Document 1G), until such time new Perinatal Services Network Guidelines are established and adopted.
- Failure to comply with the above provisions shall constitute grounds for the State to suspend or recover payments, subject to the Contractor's right of appeal, or may result in termination of the Contract or both.

B. Performance Requirements

- Contractor shall provide services based on funding set forth in Exhibit A1 and under the terms of this Contract.
- Contractor shall provide services to all eligible persons in accordance with federal and state statutes and regulations. Contractor shall assure that in planning for the provision of services, the following barriers to services are considered and addressed:
 - (a) Lack of educational materials or other resources for the provision of services;
 - (b) Geographic isolation and transportation needs of persons seeking services or remoteness of services;
 - (c) Institutional, cultural, and/or ethnicity barriers;
 - (d) Language differences;

- (e) Lack of service advocates; and,
- (f) Failure to survey or otherwise identify the barriers to service accessibility.
- (g) Needs of persons with a disability.
- 3. Contractor shall comply with any additional requirements of the documents that have been incorporated herein by reference, including, but not limited to, those on the "List of Exhibit C Documents" which is attached to Exhibit C.
- 4. Amounts awarded pursuant to Exhibit C shall be used exclusively for providing alcohol and/or drug program services consistent with the purpose of the funding.

ARTICLE V. REPORTING REQUIREMENTS

A. Financial Reports

- 1. Contractor agrees to submit the Exhibit A1 with the original contract and with each contract amendment.
- 2. Contractor shall submit timely the Quarterly Federal Financial Management Report (QFFMR) and end-of-year cost data in the form of year-end cost settlement reports, including Document 2P, "County Certification Cost Report Year-End Claim for Reimbursement" with the original signature of the Contractor's authorized designee in accordance with Document 1F, "Reporting Requirement Matrix - County Submission Requirements for the Department of Alcohol and Drug Programs."

B. Additional Reports

In accordance with HSC, Section 11758.12(c), Contractor shall submit, and shall require its Subcontractors to submit, information required by the State. The information shall include, but is not limited to, utilization reports, compliance reports, financial reports, treatment and prevention services reports, demographic characteristics of service recipients, and data as required pursuant to the following:

Document 1K:

Drug and Alcohol Treatment Access Report (DATAR) records in an electronic format as provided and/or approved by the State, and which complies with ADP compliance requirements for data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method. The format for submission shall be limited to electronic format only.

Document 1T:

CalOMS Prevention User Manual – Submit CalOMS Prevention data in the format prescribed in the CalOMS Prevention User Manual.

Contractor shall comply with the requirements which address the collection of information required in the SAPT Block Grant contained in Document 1T, incorporated by this reference ("CalOMS Prevention User Manual"). Refer to the List of Exhibits for the web site location of the manual, in which the manual is updated on a quarterly basis. Prevention service/activity data is to be reported via CalOMS Pv by all funded primary prevention providers. Services are to be reported by the date of occurrence on a weekly basis. No more than one week's data shall be aggregated into one reported service. All CalOMS Pv data shall be reviewed by each county and released to the State no

later than the end of the first month following the close of each quarter. The reporting quarters are: July through September, October through December, January through March, and April through June.

Document 3J:

CalOMS Treatment Data Collection Guide – Submit CalOMS Treatment admission, discharge, annual update, resubmission and "provider no activity report" records in an electronic format approved by the State, which complies with ADP compliance requirements for data content, data quality, data completeness, reporting frequency, reporting deadlines, and report method. When contractor obtains a new software vendor or when there are changes to the Contractor's CalOMS Treatment software, or changes to Contractors vendors CalOMS Treatment software, ADP's Information Management Services Division must be contacted and re-certification and testing of the new or changed software must be completed before Contractor can submit data.

Contractor shall follow the CalOMS Treatment Data Compliance Standards for submission of CalOMS treatment data (reference Document 3S).

Contractor agrees that it shall submit all data requested pursuant to Article V
in a manner identified, or on forms provided, by the State by the applicable
due dates or the dates in Document 1F, "Reporting Requirement Matrix County Submission Requirements for the Department of Alcohol and Drug
Programs."

3. Charitable Choice

Contractor shall submit annually the total number of referrals necessitated by religious objection to other alternative substance abuse providers. This information must be submitted to ADP in a format prescribed by ADP and at time required by ADP. (Reference is ADP Bulletin 04-5).

C. Subcontractor Documentation

Contractor shall require it's Subcontractors that are not licensed or certified by the State to submit organizational documents to the State within thirty (30) days of its execution of an initial subcontract, within ninety (90) days of the renewal or continuation of an existing subcontract or when there has been a change in Subcontractor name or ownership. Organizational documents shall include the Subcontractor's Articles of Incorporation or Partnership Agreements (as applicable), and business licenses, fictitious name permits, and such other information and documentation as may be requested by the State.

ARTICLE VI. GENERAL PROVISIONS

A. Records

Contractor shall maintain sufficient books, records, documents, and other evidence necessary for the State to audit contract performance and contract compliance. Contractor shall make these records available to the State, upon request, to evaluate the quality and quantity of services, accessibility and appropriateness of services, and to ensure fiscal accountability. Regardless of the location or ownership of such records, they shall be sufficient to determine if costs incurred by contractor are reasonable, allowable and allocated appropriately. All records must be capable of verification by qualified auditors.

- Contractor shall include in any contract with an audit firm a clause to permit access by the State to the working papers of the external independent auditor, and require that copies of the working papers shall be made for the State at its request.
- Contractor shall keep adequate and sufficient financial records and statistical data to support the year-end documents filed with the State. All records must be capable of verification by qualified auditors.
- 3. Accounting records and supporting documents shall be retained for a three-year period from the date the year-end cost settlement report was approved by the State for interim settlement. When an audit by the Federal Government, the State, or the Bureau of State Audits has been started before the expiration of the three-year period, the records shall be retained until completion of the audit and final resolution of all issues that arise in the audit. Final settlement shall be made at the end of the audit and appeal process. If an audit has not been completed within three years, the interim settlement shall be considered as the final settlement.
- Financial records shall be kept so that they clearly reflect the source of funding for each type of service for which reimbursement is claimed. These documents include, but are not limited to, all ledgers, books, vouchers, time sheets, payrolls, appointment schedules, client data cards, and schedules for allocating costs. All records must be capable of verification by qualified auditors.
- 5. Contractor's subcontracts shall require that all Subcontractors comply with the requirements of Article III, Section A.
- 6. Should a Subcontractor discontinue its contractual agreement with the Contractor, or cease to conduct business in its entirety, Contractor shall be responsible for retaining the Subcontractor's fiscal and program records for the required retention period. The SAM contains statutory requirements governing the retention, storage, and disposal of records pertaining to state funds. Contractor shall follow SAM requirements.

If the Contractor cannot physically maintain the fiscal and program records of the Subcontractor, then arrangements shall be made with the State to take possession and maintain all records.

- 7. In the expenditure of funds hereunder, and as required by 45 CFR Part 96, Contractor shall comply with the requirements of SAM and the laws and procedures applicable to the obligation and expenditure of federal and state funds.
- 8. In the event this Contract is terminated, Contractor shall deliver all of its fiscal and program records pertaining to the performance of this Contract to the State, which will retain the records for the required retention period.

B. Dispute Resolution Process

- 1. In the event of a dispute under this Exhibit C, other than an audit dispute, Contractor shall provide written notice of the particulars of the dispute to the State before exercising any other available remedy. Written notice shall include the contract number. The Director (or designee) of the State and the County Drug or Alcohol Program Administrator (or designee) shall meet to discuss the means by which they can effect an equitable resolution to the dispute. Contractor shall receive a written response from the State within sixty (60) days of the notice of dispute. The written response shall reflect the issues discussed at the meeting and state how the dispute will be resolved.
- 2. In the event of a dispute over financial audit findings between the State and the Contractor, Contractor may appeal the audit in accordance with the "NNA Audit Appeal Process" (Document 1J(a)). When a financial audit by the Federal Government, the State, or the Bureau of State Audits is conducted directly with a Subcontractor of the Contractor, and if the Subcontractor disagrees with audit disallowances related to its programs, claims or services, Contractor shall, at the Subcontractor's request, request an appeal to the State in accordance with Document 1J(a). Contractor shall include a provision in its subcontracts regarding the process by which a Subcontractor may file an audit appeal via the Contractor.

Contractors that conduct financial audits of Subcontractors, other than a Subcontractor whose funding consists entirely of non-Department funds, shall develop a process to resolve disputed financial findings and notify Subcontractors of their appeal rights pursuant to that process. This section shall not apply to those grievances or complaints arising from the financial findings of an audit or examination made by or on behalf of the State pursuant to Article IV of this Contract.

 To ensure that necessary corrective actions are taken, financial audit findings are either uncontested or upheld after appeal may be used by the State during prospective contract negotiations.

C. Negotiated Net Amount Limitations

Pursuant to HSC Section 11818, Contractor shall reimburse its Subcontractors that receive a combination of Medi-Cal funding and other federal or state funding for the same service element and location based on the Subcontractor's actual costs in accordance with Medicaid reimbursement requirements as specified in Title XIX of the Social Security Act; Title 22, and the State's Medicaid Plan. Payments at negotiated rates shall be settled to actual cost at year-end.

LIST OF EXHIBIT C DOCUMENTS INCORPORATED BY REFERENCE FISCAL YEAR 2009-10

The following documents are hereby incorporated by reference into Exhibit C and, as applicable, into Exhibit D regardless of whether or not they are actually attached to the Contract.

Document 1A: Title 45, Code of Federal Regulations 96, Subparts C and L,

Substance Abuse Prevention and Treatment Block Grant

Requirements

http://www.access.gpo.gov//nara/cfr/waisidx 04/45cfr96 04.html

Document 1B: Title 42, Code of Federal Regulations, Charitable Choice Regulations

http://www.access.gpo.gov//nara/cfr/waisidx 04/42cfr54 04.html

Document 1C: Driving-Under-the-Influence Program Requirements

Document 1D(a): Services to California Department of Corrections and Rehabilitation

(CDCR) - Parolee Services Network (PSN)

Document 1D(b): SAPT Female Offender Treatment Project (FOTP)

Document 1F: Reporting Requirement Matrix – County Submission Requirements for

the Department of Alcohol and Drug Programs

Document 1G: Perinatal Services Network Guidelines 2009 (for Non-DMC Perinatal

Programs)

http://www.adp.ca.gov/perinatal/pdf/guidelines 09.pdf

Document 1H(a): Service Code Descriptions

Document 1H(b): Program Code Listing

Document 1J(a): NNA Audit Appeals Process

Document 1K: Drug and Alcohol Treatment Access Report (DATAR)

http://www.adp.ca.gov/datar/manuals/DATARWeb manual.pdf

Document 1P: Alcohol and/or Other Drug Program Certification Standards

(March 15, 2004)

http://www.adp.ca.gov/Licensing/doc/Alcohol andor Other Drug Pro

gram Certification Standards.doc

Document 1T: CalOMS Prevention User Manual

http://www.kitsco.com/casupport/WebHelp/CalOMS_Manual.htm

Document 1V: Youth Treatment Guidelines

http://www.adp.ca.gov/youth/pdf/Youth Treatment Guidelines.pdf

Document 1W: Certification Regarding Lobbying

Document 1X: Disclosure of Lobbying Activities – Standard Form LLL

http://www.whitehouse.gov/omb/grants/sflllin.pdf

Document 2F: Standards for Drug Treatment Programs (October 21, 1981)

http://www.adp.ca.gov/dmc/pdf/DMCA Standards for Drug Treatme

nt Programs.pdf

Document 2P: County Certification - Cost Report Year-End Claim For

Reimbursement

Document 3G: California Code of Regulations, Title 9 – Rehabilitation and

Developmental Services, Division 4 - Department of Alcohol and Drug

Programs, Chapter 4 – Narcotic Treatment Programs

http://www.calregs.com

Document 3H: California Code of Regulations, Title 9 -- Rehabilitation and

Developmental Services, Division 4 - Department of Alcohol and Drug

Programs, Chapter 8 - Certification of Alcohol and Other Drug

Counselors

http://www.calregs.com

Document 3J: CalOMS Treatment Data Collection Guide

http://www.adp.ca.gov/CalOMS/pdf/CalOMS Data Collection Guide.pdf

Document 3K: Privacy, Confidentiality and Information Security Provisions

http://www.adp.ca.gov/NNA/files/Document 3K-

Privacy, Confidentiality and Information Security Provisions.doc

Document 3O: Quarterly Federal Financial Management Report (QFFMR) 2008-09

http://www.adp.ca.gov/NNA/support_files.shtml

Document 3S CalOMS Treatment Data Compliance Standards

http://www.adp.ca.gov/CalOMS/pdf/CalOMS_Data_Compliance.pdf

Document 3T ADP Local Assistance Funding Matrix

DRUG MEDI-CAL ALCOHOL AND OTHER DRUG TREATMENT SERVICES

ARTICLE I. FORMATION AND PURPOSE

- A. Exhibit D of this Contract is entered into by and between the State and the Contractor for the purpose of identifying and providing for covered Drug Medi-Cal (DMC) services for alcohol and other drug (AOD) treatment in the Contractor's service area pursuant to Sections 11848, 11848.5(a) and (b), and 11758.40 through 11758.47 of the Health and Safety Code (hereinafter referred to as HSC), Title 22 of the California Code of Regulations (hereinafter referred to as Title 22), Sections 51341.1, 51490.1, and 51516.1 and consistent with the Interagency Agreement between the Department of Health Care Services (DHCS) and the State.
- B. It is further agreed that Exhibit D of this Contract is controlled by applicable provisions of: (a) the Welfare and Institutions Code (hereinafter referred to as W&IC), Chapter 7, Sections 14000, et seq., in particular, but not limited to, Sections 14021, 14021.5, 14021.6, 14043, et seq. and 14132.90; (b) the HSC, in particular but not limited to, Sections 11758.40 through 11758.47; (c) Title 22, including but not limited to Sections 51490.1, 51341.1 and 51516.1; and (d) Division 4 of Title 9 of the California Code of Regulations (hereinafter referred to as Title 9).
- C. It is understood and agreed that nothing contained in Exhibit D shall be construed to impair the single state agency authority of DHCS.
- D. The objective of Exhibit D is to make AOD treatment services available to Medi-Cal beneficiaries through utilization of federal funds available pursuant to Title XIX of the Social Security Act for reimbursable covered services rendered by certified DMC providers.
- E. Awards under the Medical Assistance Program (CFDA 93.778) are no longer excluded from coverage under the HHS implementation of the A-102 Common Rule, 45 CFR part 92 (Federal Register, September 8, 2003, 68 FR 52843-52844). This change is effective for any grant award under this program made after issuance of the initial awards for the second quarter of Federal fiscal year (FY) 2004. This program also is subject to the requirements of 45 CFR part 95 and the cost principles under Office of Management and Budget Circular A-87 (as provided in Cost Principles and Procedures for Developing Cost Allocation Plans and Indirect Cost Rates for Agreements with the Federal Government, HHS Publication ASMB C-10, available on the Internet at http://rates.psc.gov/fms/dca/asmb%20c-10.pdf).

ARTICLE II. DEFINITIONS

The words and terms of this Contract are intended to have their usual meaning unless a specific or more limited meaning is associated with their usage pursuant to the HSC, Title 9, and/or Title 22. Definitions of covered treatment modalities and services are found in Title 22 (Document 2C) and are incorporated by this reference. The following definitions shall apply to Exhibit D of this Contact:

- A. "Administrative Costs" means the Contractor's actual direct costs, as recorded in the Contractor's financial records and supported by source documentation, to administer the program or an activity to provide service to the DMC program. Administrative costs do not include the cost of treatment or other direct services to the beneficiary. Administrative costs may include, but are not limited to, the cost of training, program review, and activities related to billing. Administrative costs may include Contractor's overhead per the approved indirect cost rate proposal pursuant to OMB Circular A-87. Contractor's indirect costs shall not be distributed to Subcontractors.
- B. "Beneficiary" means a person who: (a) has been determined eligible for Medi-Cal; (b) is not institutionalized; (c) has a substance-related disorder per the "Diagnostic and Statistical Manual of Mental Disorders III Revised (DSM)," and/or DSM IV criteria; and (d) meets the admission criteria to receive DMC covered services.
- C. "Contractor" means the county identified in the Standard Agreement or the department authorized by that county's Board of Supervisors to administer alcohol and drug programs.
- D. "Covered Services" means those DMC services authorized by Title XIX of the Social Security Act; Title 22 Section 51341.1; HSC Section 11758.46; and California's Medicaid State Plan. Covered services are Naltrexone treatment, outpatient drug-free treatment, narcotic replacement therapy, day care rehabilitative (for pregnant, postpartum, and Early and Periodic Screening, Diagnosis and Treatment (EPSDT) beneficiaries only), and perinatal residential AOD treatment (excluding room and board).
- E. "Drug Medi-Cal Program" means the state system wherein beneficiaries receive covered services from DMC-certified AOD treatment providers who are reimbursed for those services with a combination State General Fund (SGF) and federal Medicaid funds.
- F: "Early and Periodic Screening, Diagnosis, and Treatment Program" means the federally mandated Medicaid benefit that entitles full-scope Medi-Cal-covered beneficiaries under 21 years of age to receive any Medicaid service necessary to correct or ameliorate a defect, mental illness, or other condition, such as a substance-related disorder, that is discovered during a health screening.

- "Early and Periodic Screening, Diagnosis, and Treatment Program
 (Supplemental Service)" means the supplemental individual outpatient drug-free
 (ODF) counseling services provided to beneficiaries eligible for the EPSDT program.
 Supplemental individual ODF counseling consists of any necessary individual AOD
 counseling not otherwise included in the ODF counseling modality under the DMC
 program.
- G. "Federal Financial Participation (FFP)" means the share of federal Medicaid funds for reimbursement of DMC services.
- H. "Final Settlement" means permanent settlement of the Contractor's actual allowable costs or expenditures as determined at the time of audit, which shall be completed within three years of the date the year-end cost settlement report was accepted for interim settlement by the State. If the audit is not completed within three years, the interim settlement shall be considered as the final settlement.
- "Interim Settlement" means temporary settlement of actual allowable costs or expenditures reflected in the Contractor's year-end cost settlement report.
- J. "Medical Necessity" means those AOD treatment services that are reasonable and necessary to protect life, prevent significant illness or disability, or alleviate severe pain through the diagnosis and treatment of a disease, illness, or injury or, in the case of EPSDT, services that meet the criteria specified in Title 22, Section 51340.1.
- K. "Minor Consent DMC Services" are those covered services that, pursuant to Family Code Section 6929, may be provided to persons 12-20 years old without parental consent.
- L. "Narcotic Treatment Program (NTP)" means an outpatient clinic licensed by the State to provide narcotic replacement therapy using methadone directed at stabilization and rehabilitation of persons who are opiate-addicted and have an AOD diagnosis.
- M. "Perinatal DMC Services" means covered services as well as mother/child habilitative and rehabilitative services; services access (i.e., provision or arrangement of transportation to and from medically necessary treatment); education to reduce harmful effects of alcohol and drugs on the mother and fetus or infant; and coordination of ancillary services (Title 22, Section 51341.1(c) 4).
- N. "Postpartum," (as defined for DMC purposes) means the 60-day period beginning on the last day of pregnancy, regardless of whether other conditions of eligibility are met. Eligibility shall end on the last day of the calendar month in which the 60th day occurs.

- O. "Postservice Postpayment (PSPP) Utilization Review" means the review for program compliance and medical necessity conducted by the State after service was rendered and the claim paid. State may recover prior payments if such review determines that the services did not comply with the applicable statutes, regulations, or standards.
- P. "Projected Units of Service" means the number of reimbursable DMC units of service, based on historical data and current capacity, Contractor expects to provide on an annual basis.
- Q. "Protected Population" means: (1) EPSDT-eligible Medi-Cal beneficiaries under age 21; and (2) Medi-Cal-eligible pregnant and postpartum women.
- R. "Provider of DMC Services" means any person or entity that provides direct AOD treatment services and has been certified by State as meeting the standards for participation in the DMC program set forth in the "DMC Certification Standards for Substance Abuse Clinics", Document 2E and "Standards for Drug Treatment Programs (October 21, 1981)", Document 2F.
- S. "Satellite Site" has the same meaning as defined in the Drug Medi-Cal Certification Standards for Substance Abuse Clinics.
- T. "Service Area" means the geographical area under Contractor's jurisdiction.
- U. "Statewide Maximum Allowances (SMA)" means the maximum amount authorized to be paid by DMC for each covered unit of service for outpatient drug free, day care rehabilitative, perinatal residential, and Naltrexone treatment services. Rates are subject to change annually. The SMA for FY 2009-10 is listed in the "Unit of Service" table in this Article II, Section Y.
- V. "Subcontract" means an agreement between the Contractor and its Subcontractors. A Subcontractor shall not delegate its obligation to provide covered services or otherwise subcontract for the provision of direct patient/client services.
- W. "Subcontractor" means an individual or entity that is DMC certified and has entered into an agreement with the Contractor to be a direct provider of covered services. It may also mean a vendor who has entered into a procurement agreement with the Contractor to provide any of the administrative functions related to fulfilling the Contractor's obligations under the terms of this Exhibit D.

X. "Uniform Statewide Daily Reimbursement (USDR) Rate" means the rate for NTP services based on a unit of service that is a daily treatment service provided pursuant to Title 22, Sections 51341.1 and 51516.1 and Title 9, commencing with Section 10000 (Document 3G), or the rate for individual or group counseling. The following table shows the Fiscal Year (FY) 2009-10 USDR rates. This table will be updated upon the approval of the FY 2010 rates.

Service	Type of UOS	Non-perinatal UOS (*)	Perinatal UOS (*)		
NTP-Methadone Dosing	Daily	\$11.34 \$1.03(*)	\$12.21 \$1.11(*)		
NTP-Individual Counseling (**)	One 10-minute increment	\$13.30 \$1.22(*)	\$19.04 \$1.74(*) \$6.36 \$0.58(*)		
NTP Group Counseling (**)	One 10-minute increment	\$3.14 \$0.29(*)			

- (*) Administrative Costs incorporated within the rate.
- (**) The NTP Subcontractors may be reimbursed for up to 200 minutes (20 10-minute increments) of individual and/or group counseling per calendar month per beneficiary.

Reimbursement for covered NTP services shall be limited to the lower of the NTP's usual and customary charge to the general public for the same or similar services or the USDR rate. However, reimbursement paid by a county to an NTP provider for services provided to any person subject to Penal Code Sections 1210.1 or 3063.1 and for which the individual patient/client is not liable to pay, does not constitute a usual or customary charge to the general public. (HSC Section 11758.42(h)(2)(A)).

Y. "Unit of Service" means a face-to-face contact on a calendar day for outpatient drug free, day care rehabilitative, perinatal residential, and Naltrexone treatment services. Only one face-to-face service contact per day is covered by DMC except in the case of emergencies when an additional face-to-face contact may be covered for intake crisis intervention or collateral service. To count as a unit of service, the second contact shall not duplicate the services provided on the first contact, and each contact shall be clearly documented in the beneficiary's record. Units of service and SMA for FY 2009-10 are identified in the following table. This table will be updated upon the approval of the FY 2010 rates.

Service	rvice Type of Unit of Service (UOS)		Perinatal UOS			
Day Care Rehabilitative	Face-to-Face Visit	\$61.05 (for EPSDT only or pregnant/postpartum)	\$73.04			
Naltrexone Treatment	Face-to-Face Visit	\$19.07	NA .			
Outpatient Drug Free	Face-to Face Visit – Individual (per person)	\$66.53	\$95.23			
	Face-to-Face Visit – Group (per person)	\$28.27	\$57.26			
Perinatal Residential	Perinatal Residential Daily – Residential Day		\$89.90			

INVIS

ARTICLE III. PROVISION OF SERVICE

A. Covered Services

- Contractor shall establish assessment and referral procedures and shall arrange, provide, or subcontract for covered services in the Contractor's service area. Covered services include:
 - (a) Outpatient drug-free treatment;
 - (b) Narcotic replacement therapy;
 - (c) Naltrexone treatment;
 - (d) Day care rehabilitative (pregnant or postpartum, and EPSDT only); and,
 - (e) Perinatal residential AOD treatment services (excluding room and board).
- 2. In the event of a conflict between the definition of services contained in this Exhibit D and the definition of services in Title 22, Sections 51341.1, 51490.1, and 51516.1, the provisions of Title 22 shall govern.

B. Federal and State Mandates

- Contractor, to the extent applicable, shall comply with "Sobky v. Smoley" (Document 2A), 855 F. Supp. 1123 (E.D. Cal 1994), incorporated by this reference.
- 2. Contractor shall comply with any additional legal requirements including, but not limited to, any court-ordered requirements and statutory or regulatory amendments to existing law (including changes in covered services) that are imposed or are effective subsequent to the execution of this Contract. Contractor agrees that this Contract shall be amended to reflect such requirements, amendments, or changes.
- Contractor shall comply with federal and state mandates to provide alcohol and other drug treatment services deemed medically necessary for Medi-Cal eligible: (1) pregnant and postpartum women, and (2) youth under age 21 who are eligible under the EPSDT Program.
- 4. Contractor shall comply with the California Family Code Section 6929 in the provision of Drug Medi-Cal Services for minors.

- Contractor shall maintain continuous availability and accessibility of covered services and facilities, service sites, and personnel to provide the covered services in its service area. Such services shall not be limited due to budgetary constraints.
 - (a) When a request for covered services is made by a beneficiary, Contractor shall require services to be initiated with reasonable promptness. Contractor shall have a documented system for monitoring and evaluating accessibility of care, including a system for addressing problems that develop regarding waiting times and appointments.
 - (b) Contractor shall submit, and shall require its Subcontractors to submit, client data required by the State. The information shall include, but is not limited to, data as required pursuant to the following:

Document 1K:

Drug and Alcohol Treatment Access Report (DATAR) in an electronic format as provided and/or approved by the State, which complies with the Department of Alcohol and Drug Programs (ADP) compliance requirements for data content, data quality, data completeness, reporting frequency, reporting deadlines, and reporting method. The format for submission shall be limited to electronic format only.

Document 3J:

California Outcomes Measurement System (CalOMS) Treatment records – Submit CalOMS Treatment admission, discharge, annual update, or "provider no activity report" records in an electronic format provided and/or approved by the State, which complies with ADP compliance requirements for data content, data quality, data completeness, reporting frequency, reporting deadlines, and report method.

When contractor obtains a new software vendor or when there are changes to the Contractor's CalOMS Treatment software, or changes to Contractors vendors CalOMS Treatment software, ADP's Information Management Services Division must be contacted and re-certification and testing of the new or changed software must be completed before Contractor can submit data.

Contractor shall follow the CalOMS Treatment Data Compliance Standards for submission of CalOMS Treatment data (reference Document 3S).

- (c) Contractor agrees that it shall submit all data requested in (a) and (b) in a manner identified, or on forms provided, by the State by the applicable due dates or the dates in Document 1F, "Reporting Requirement Matrix – County Submission Requirements for the Department of Alcohol and Drug Programs."
- (d) Contractor shall require that treatment programs are accessible to people with disabilities in accordance with Title 45, Code of Federal Regulations (hereinafter referred to as CFR), Part 84 and the Americans with Disabilities Act.
- Covered services, whether provided directly by the Contractor or through subcontractors with DMC certified programs, shall be provided to beneficiaries without regard to the beneficiaries' county of residence.
- 7. In the event Contractor fails to comply with subdivisions 1 through 6 of this Section, the State may terminate this Contract for cause.
- 8. Contractor shall notify the State in writing prior to reducing the provision of covered services. In addition, any proposal to change the location where covered services are provided, or to reduce their availability, shall be submitted in an application to the State sixty (60) days prior to the proposed effective date. Contractor shall not implement the proposed changes if the State denies the Contractor's proposal.
- 9. Contractor shall amend its subcontracts for covered services in order to provide sufficient DMC SGF to match allowable federal Medicaid reimbursements for any increase in provider DMC services to beneficiaries.
- 10. Contractor shall require that providers of perinatal DMC services are properly certified to provide these services and comply with the requirements contained in Title 22, Section 51341.1, Services for Pregnant and Postpartum Women.
- 11. In the event that the Contractor fails to provide covered services in accordance with the provisions of this Contract, at the discretion of the State, Contractor may be required to forfeit its DMC SGF allocation and surrender its authority to function as the administrator of covered services in its service area.
- 12. The failure of the Contractor or its Subcontractors to comply with Section B of this Article will be deemed a breach of this Contract sufficient to terminate this Contract for cause. In the event the Contract is terminated, the provision of Exhibit B, Paragraph G, subsections 2, 3, and 4 shall apply.

- C. Provider Participation, Certification, Recertification, and Appeals
 - State will review and certify eligible providers to participate in the DMC program. Certification agreements will not be time limited. State will conduct recertification on-site visits at clinics for circumstances identified in the "Drug Medi-Cal Certification Standards for Substance Abuse Clinics", (Document 2E). Document 2E contains the appeal process in the event the State disapproves a provider's request for certification or recertification and shall be included in the Contractor's subcontracts.
 - Contractor shall include a provision in its subcontracts informing the provider that it may seek assistance from the State in the event of a dispute over the terms and conditions of subcontracts.
 - 3. Contractor shall require all the providers of services to be licensed, registered, DMC certified and/or approved in accordance with applicable laws and regulations. Contractor's subcontracts shall require that providers comply with the following regulations and guidelines:
 - (a) Title 21, CFR Part 1300, et seq., Title 42, CFR, Part 8;
 - (b) Drug Medi-Cal Certification Standards for Substance Abuse Clinics (Document 2E);
 - (c) Title 22, CCR, Sections 51341.1, 51490.1, and 51516.1, (Document 2C);
 - (d) Standards for Drug Treatment Programs (October 21, 1981) (Document 2F); and
 - (e) Title 9, CCR, Division 4, Chapter 4, Subchapter 1, Sections 10000, et seq.

In the event of conflicts, the provisions of Title 22 shall control if they are more stringent.

Contractor acknowledges that if a provider is under investigation by DHCS or any state, local or federal law enforcement agency for fraud or abuse, the State may temporarily suspend the provider from the DMC program, pursuant to W&IC Section 14043.36(a).

Contractor and Subcontractors shall participate in DMC orientation training sessions as prescribed by the Department.

4. If, at any time, a Subcontractor's license, registration, certification, or approval to operate an AOD treatment program or provide a covered service is revoked, suspended, modified, or not renewed, the State may amend this Contract.

A provider's certification to participate in the DMC program shall automatically terminate in the event that the provider or its owners, officers or directors are convicted of Medi-Cal fraud, abuse or malfeasance. For purposes of this section, a conviction shall include a plea of guilty or nolo contendere.

ARTICLE IV. FISCAL PROVISIONS

A. Reimbursements

To the extent that the Contractor provides the covered services in a satisfactory manner and in accordance with the terms and conditions of this Contract, the State agrees to pay the Contractor DMC SGF and federal Medicaid funds according to Article V. Subject to the availability of such funds, Contractor shall receive federal Medicaid funds for allowable expenditures as established by the federal government and approved by DHCS, for the cost of services rendered to beneficiaries.

- Reimbursement for covered services shall be made in accordance with applicable provisions of Title 22 and all other currently applicable policies and procedures.
- 2. It is understood and agreed that failure by the Contractor or its Subcontractors to comply with applicable federal and state requirements in rendering covered services shall be sufficient cause for the State to deny payments to and/or recover payments from the Contractor. If the State, DHCS, or the Department of Health and Human Services (DHHS) disallows or denies payments for any claim, Contractor shall repay to the State the federal Medicaid funds and SGF it received for all claims so disallowed or denied. The overpayment shall be recovered by any of the methods allowed in Title 22, CCR, Sections 51047(a) and (b).

Before such denial, recoupment, or disallowances are made, State shall provide the Contractor with written notice of its proposed action. Such notice shall include the reason for the proposed action and shall allow the Contractor sixty (60) days to submit additional information before the proposed action is taken, as required in Title 22, CCR, Section 51047(a). This requirement does not apply to the DMC PSPP Utilization Reviews.

The State shall refund to the Contractor any recovered Drug Medi-Cal overpayment that is subsequently determined to have been erroneously collected, together with interest, in accordance with Title 22, CCR, Section 51047(e).

This Contract encumbers a specific amount of DMC SGF to be used in accordance with the Contractor's allocation as described in the State's final allocation notice. This amount is intended to cover all anticipated need for DMC SGF covered services. If the need for allowable DMC services is less than anticipated in any particular fiscal year, the State may reduce the contract amount of DMC SGF through a contract amendment, the cost settlement process, or other available processes. If, during the term of this Contract, Contractor's cost for allowable DMC services is anticipated to exceed the maximum amount allowed for services described in Exhibit D, and the Contractor anticipates utilizing all available DMC SGF allocated for the State match, Contractor shall submit a written request with justification to the State for additional DMC funding.

4. Contractor shall use DMC SGF without DMC FFP to fund Drug Medi-Cal services to clients eligible for those services but not eligible for federal funding under Title XIX of the Social Security Act (42 U.S.C. Ch. 7, Subch. XIX).

B. Return of Unexpended Funds

Contractor assumes the total cost of providing covered services on the basis of the payments delineated in this Exhibit D. Any federal Medicaid funds and DMC SGF paid to the Contractor, but not expended for DMC services shall be returned to the State.

C. Availability of Funds

It is understood that, for the mutual benefit of both parties, this Contract may have been written before ascertaining the availability of congressional appropriation of funds in order to avoid program and fiscal delays that would occur if this Contract were not executed until after that determination. If so, State may amend the amount of funding provided for in this Contract based on the actual congressional appropriation.

D. Additional Restrictions

This Contract is subject to any additional restrictions, limitations, or conditions enacted by the Congress, or any statute enacted by the Congress, which may affect the provisions, terms, or funding of this Contract in any manner.

E. Amendment or Cancellation Due to Insufficient Appropriation

This Contract is valid and enforceable only if sufficient funds are made available to the State by the United States Government for the purpose of the DMC program. It is mutually agreed that if the Congress does not appropriate sufficient funds for this program, State has the option to void this contract or to amend the Contract to reflect any reduction of funds.

F. Exemptions

Exemptions to the provisions of Section E, above, may be granted by the California Department of Finance provided that the Director of DHCS certifies in writing that federal funds are available for the term of the contract.

G. Payment for Covered Services

Any payment for covered services rendered pursuant to this Exhibit D shall only be made pursuant to applicable provisions of Title XIX of the Social Security Act; the W⁣ the HSC; California's Medicaid State Plan; and Sections 51341.1, 51490.1, 51516.1, and 51532 of Title 22.

 Contractor shall be reimbursed by the State on the basis of its actual net reimbursable cost, including any allowable county administrative costs, not to exceed the unit of service maximum rate.

Pursuant to HSC Section 11758.42 (h), reimbursement to NTP providers shall be limited to the lower of either the uniform statewide monthly reimbursement rate, or the provider's usual and customary charge to the general public for the same or similar service. However, reimbursement paid by a Contractor to an NTP provider for services provided to any person subject to Penal Code Sections 1210.1 or 3063.1 and for which the individual client is not liable to pay, does not constitute a usual or customary charge to the general public. (HSC Section 11758.42(h)(2)(A).)

2. Pursuant to HSC Section 11818(b)(2), Contractor shall reimburse providers that receive a combination of Medi-Cal funding and other federal or state funding for the same service element and location based on the provider's actual costs in accordance with Medi-Cal reimbursement requirements as specified in Title XIX of the Social Security Act; Title 22, and the state's Medicaid Plan. Payments at negotiated rates shall be settled to actual cost at year-end.

H. Allowable Costs

Allowable costs, as used in Section 51516.1 of Title 22 shall be determined in accordance with Title 42, CFR Parts 405 and 413, and Centers for Medicare and Medicaid Services (CMS), "Medicare Provider Reimbursement Manual (Publication Number 15)," which can be obtained from the Centers for Medicare & Medicaid Services, or www.cms.hhs.gov." In accordance with W&IC Sections 14132.44 and 14132.47, funds allocated to the Contractor for DMC services, including funding for alcohol and other drug services for pregnant and postpartum women pursuant to Title 22, Section 51341.1(c), may not be used as match for targeted case management services or for Medi-Cal administrative activities.

I. Records and Additional Audit Requirements

- Accurate fiscal records and supporting documentation shall be maintained by the Contractor and its Subcontractors to support all claims for reimbursement. All records must be capable of verification by auditors.
- Should a Subcontractor discontinue operations, Contractor shall retain the Subcontractor's fiscal and program records for the required retention period. The State Administrative Manual (SAM) contains statutory requirements governing the retention, storage, and disposal of records retaining to state funds. Contractor shall follow SAM requirements.

If the Contractor cannot physically maintain the fiscal and program records of the Subcontractor, then arrangements shall be made with the State to take possession and maintain all records.

3. Accounting records and supporting documents shall be retained for a three-year period from the date the year-end cost settlement report was approved by the State for interim settlement. When an audit by the Federal Government, the State, or the Bureau of State Audits has been started before the expiration of the three-year period, the records shall be retained until completion of the audit and final resolution of all issues that arise in the audit. Final settlement shall be made at the end of the audit and appeal process. If an audit has not been completed within three years, the interim settlement shall be considered as the final settlement.

Contractor shall retain client records for a minimum of three (3) years from the date of the last face-to-face contact. When an audit by the Federal Government, the State, or DHCS has been started before the expiration of the three-year period, the client records shall be maintained until completion of the audit and the final resolution of all audit issues.

- 4. In addition to the audit requirements set forth in Exhibit B, State may also conduct financial audits of DMC programs, exclusive of NTP services provided on or after July 1, 1997, to accomplish any of, but not limited to, the following audit objectives:
 - (a) To review reported costs for validity, appropriate allocation methodology, and compliance with Medicaid laws and regulations;
 - To ensure that only the cost of allowable DMC activities are included in reported costs;
 - (c) To determine the provider's usual and customary charge to the general public in accordance with CMS (The Medicare Provider Reimbursement Manual) (CMS-Pub.15), which can be obtained from the Centers for Medicare & Medicaid Services, Baltimore, Maryland, or www.cms.hhs.gov, for comparison to the DMC cost per unit;
 - (d) To review documentation of units of service and determine the final number of approved units of service;
 - (e) To determine the amount of clients' third-party revenue and Medi-Cal share of cost to offset allowable DMC reimbursement; and,
 - (f) To compute final settlement based on the lower of actual allowable cost, the usual and customary charge, or the maximum allowance, in accordance with Title 22, Section 51516.1.
- In addition to the audit requirements set forth in Exhibit B, State may conduct financial audits of NTP programs. For NTP services on or after July 1, 1997, the audits will address items 4(c) through 4(e) above, except that the comparison of the provider's usual and customary charge in 4(c) will be to the DMC USDR rate in lieu of DMC cost per unit. In addition, these audits will include, but not be limited to:

- (a) For those NTP providers required to submit a cost report pursuant to HSC Section 11758.46(j)(2), a review of cost allocation methodology between NTP and other service modalities, and between DMC and other funding sources;
- (b) A review of actual costs incurred for comparison to services claimed;
- (c) A review of counseling claims to ensure that the appropriate group or individual counseling rate has been used and that counseling sessions have been billed appropriately;
- (d) A review of the number of clients in group sessions to ensure that sessions include no less than four and no more than ten clients at the same time, with at least one Medi-Cal client in attendance;
- (e) Computation of final settlement based on the lower of USDR rate or the provider's usual and customary charge to the general public; and,
- (f) A review of supporting service, time, financial, and patient records to verify the validity of counseling claims.
- 6. Audit reports by the State and/or DHCS shall reflect all findings and any recommendations, adjustments, or corrective action necessary as a result of those findings.
- 7. Contractor shall be responsible for any disallowances taken by the Federal Government, State, the State, the Bureau of State Audits, or DHCS as a result of any audit exception that is related to its responsibilities. Contractor shall not use funds administered by the State to repay one federal funding source with funds provided by another federal funding source, to repay federal funds with state funds, or to repay state funds with federal funds.
- 8. Contractor agrees to promptly develop and implement any corrective action plans in a manner acceptable to the State in order to comply with recommendations contained in any audit report. Such corrective action plans shall include time-specific objectives to allow for measurement of progress and are subject to verification by the State within one year from the date of the plan.
- 9. Contractor, in coordination with the State, must provide follow-up on all significant findings in the audit report, including findings relating to a Subcontractor, and submit the results to the State.
- 10. If differences cannot be resolved between the State and/or DHCS and the Contractor regarding the terms of the final financial audit settlements for funds expended under Exhibit D, Contractor may request an appeal in accordance with the appeal process described in the "DMC Audit Appeal Process," Document 1J(b), incorporated by this reference. When a financial audit is conducted by the Federal Government, the State, or the Bureau of State Audits directly with a Subcontractor of the Contractor, and if the Subcontractor

disagrees with audit disallowances related to its programs, claims or services, Contractor shall, at the Subcontractor's request, request an appeal to the State in accordance with Document 1J(b). Contractor shall include a provision in its subcontracts regarding the process by which a Subcontractor may file an audit appeal via the Contractor.

Contractors that conduct financial audits of Subcontractors, other than a Subcontractor whose funding consists entirely of non-Department funds, shall develop a process to resolve disputed financial findings and notify Subcontractors of their appeal rights pursuant to that process.

- 11. Providers of DMC services shall, upon request, make available to the State their fiscal and other records to assure that such provider have adequate recordkeeping capability and to assure that reimbursement for covered DMC services are made in accordance with Title 22, CCR, Section 51516.1. These records include, but are not limited to, matters pertaining to:
 - (a) Provider ownership, organization, and operation;
 - (b) Fiscal, medical, and other recordkeeping systems;
 - (c) Federal income tax status;
 - (d) Asset acquisition, lease, sale, or other action;
 - (e) Franchise or management arrangements;
 - (f) Patient service charge schedules;
 - (g) Costs of operation;
 - (h) Cost allocation methodology;
 - (i) Amounts of income received by source and purpose; and
 - (j) Flow of funds and working capital.
- 12. In the event this Contract is terminated, Contractor shall deliver its entire fiscal and program records pertaining to the performance of this Contract to the State, which will retain the records for the required retention period.
- 13. Contractor shall retain records of utilization review activities required in Article VI herein for a minimum of three (3) years.

ARTICLE V. INVOICE/CLAIM AND PAYMENT PROCEDURES

A. Payments

- State shall reimburse the Contractor:
 - (a) The federal Medicaid amount and the DMC SGF amount upon approval by DHCS of the DMC claims and reports submitted in accordance with Article 5 of Section B, below.
 - (b) The federal Medicaid and DMC SGF:
 - i At either the USDR or the provider's usual or customary charge to the general public for NTP's; or,
 - ii At a rate that is the lesser of the projected cost or the maximum rate allowance for other DMC modalities.
- State will adjust subsequent reimbursements to the Contractor to actual allowable costs. Actual allowable costs are defined in the Medicare Provider Reimbursement Manual (CMS-Pub.15), which can be obtained from the Centers for Medicare & Medicaid Services, Baltimore, Maryland, or www.cms.hhs.gov.
- 3. Contractors and Subcontractors must accept, as payment in full, the amounts paid by the State in accordance with Title 22, CCR, Section 51516.1, plus any cost sharing charges (deductible, coinsurance, or copayment) required to be paid by the client. However, Contractors and Subcontractors may not deny services to any client eligible for DMC services on account of the client's inability to pay or location of eligibility. Contractors and Subcontractors may not demand any additional payment from the State, client, or other third party payers.

B. Drug Medi-Cal Claims and Reports

- Contractors or providers that invoice the State or the County for services identified in Section 51516.1 of Title 22 shall submit claims in accordance with the DMC Provider Billing manual.
 - (a) Claims shall be submitted electronically in the Health Insurance Portability and Accountability Act (HIPAA) 837 format.

(b) When applicable, claims shall be accompanied by Provider Report of Drug Medi-Cal Claims Adjustment (ADP 5035C), Document 2J.

Note: The following forms shall be prepared as needed and retained by the provider for review by State staff:

- Multiple Billing Override Certification (ADP 7700), Document 2K
- Good Cause Certification (ADP 6065), Document 2L
- 2. In the absence of good cause documented on the Good Cause Certification (ADP 6065A or 6065B) form, claims that are not submitted within 30 days of the end of the month of service shall be denied. The existence of good cause shall be determined by the State in accordance with Title 22, CCR, Sections 51008 and 51008.5.
- 3. Claims for reimbursement shall include only those services covered under Title 22, Section 51341.1(c-d) and administrative charges that are allowed under W&IC, Sections 14132.44 and 14132.47.
- 4. Contractor shall utilize the Companion Guides for HIPAA 837P and 835 Transactions (Document 2Y and 3P) for understanding and obtaining instructions for the DMC billing process and obtaining adjudicated claim information. Contractor shall also utilize the Companion Guides for 276 (Document 3Q) and 277 (Document 3R) for checking status of claims.

C. Year-End Cost Settlement Reports

- State will not accept year-end cost settlement reports from the Subcontractor(s) directly. Pursuant to HSC Section 11758.46 (j)(2) Contractor shall submit to the State, on November 1 of each year, the following documents by paper or electronic submission for the previous fiscal year:
 - (a) Document 2P, County Certification Year-End Claim for Reimbursement
 - (b) Document 2P(a) and 2P(b), Drug Medi-Cal Cost Report Forms for Day Care Rehabilitative for Alcohol and Drug or Perinatal (if applicable)
 - (c) Document 2P(c) and 2P(d), Drug Medi-Cal Cost Report Forms for Outpatient Drug Free Individual Counseling for Alcohol and Drug or Perinatal (if applicable)
 - (d) Document 2P(e) and 2P(f), Drug Medi-Cal Cost Report Forms for Outpatient Drug Free Group Counseling for Alcohol and Drug or Perinatal (if applicable)
 - (e) Document 2P(g), Drug Medi-Cal Cost Report Forms for Residential for Perinatal (if applicable)

- (f) Document 2P(h) and 2P(i), Drug Medi-Cal Expenditure Forms for Narcotic Treatment Programs for Alcohol and Drug or Perinatal (if applicable)
- (g) Electronic program as prescribed by the State that contains the detailed cost report data
- State may settle costs for DMC services based on the year-end cost settlement report as the final amendment to the approved single State/County contract.
- 3. Reimbursement for covered services, other than NTP services, shall be limited to the lower of: (a) the provider's usual and customary charges to the general public for the same or similar services; (b) the provider's actual allowable costs; or (c) the DMC SMA for the modality.
- 4. Reimbursement to NTP's shall be limited to the lower of either the USDR, pursuant to HSC Section 11758.42(h)(1), or the provider's usual and customary charge to the general public for the same or similar service. However, reimbursement paid by a county to an NTP provider for services provided to any person subject to Penal Code Sections 1210.1 or 3063.1 and for which the individual client is not liable to pay, does not constitute a usual or customary charge to the general public. (HSC Section 11758.42(h)(2)(A)).

ARTICLE VI. POSTSERVICE POSTPAYMENT UTILIZATION REVIEW

- A. State shall conduct Postservice Postpayment (PSPP) utilization reviews in accordance with Title 22 Section 51341.1. Any claimed DMC service may be reviewed for compliance with all applicable standards, regulations and program coverage after services are rendered and the claim paid.
- B. State shall take appropriate steps in accordance with Title 22, CCR, Section 51341.1 to recover payments made if subsequent investigation uncovers evidence that the claim(s) should not have been paid or that DMC services have been improperly utilized, and/or shall take the corrective action as appropriate.

Contractor and/or Subcontractor may appeal DMC dispositions concerning demands for recovery of payment and/or programmatic deficiencies of specific claims. Such appeals shall be handled pursuant to Title 22, CCR, Section 51015, in accordance with the Interagency Agreement between the State and DHCS. This section shall not apply to those grievances or complaints arising from the financial findings of an audit or examination made by or on behalf of the State pursuant to Article IV, Division I, of this Contract.

- C. State shall monitor the Subcontractor's compliance with PSPP utilization review requirements in accordance with Title 22. DHCS and the federal government may also review the existence and effectiveness of the State's utilization review system.
- D. Contractor shall implement and maintain compliance with the system of review described in Title 22, Section 51341.1, for the purposes of reviewing the utilization, quality, and appropriateness of covered services and ensuring that all applicable Medi-Cal requirements are met.
- E. Satellite sites must keep a record of the clients/patients being treated at that location. Contractor shall retain client records for a minimum of three (3) years from the date of the last face-to-face contact. When an audit by the Federal Government, the State, or DHCS has been started before the expiration of the three-year period, the client records shall be maintained until completion of the audit and the final resolution of all issues as a result of the audit.

LIST OF EXHIBIT D DOCUMENTS INCORPORATED BY REFERENCE* FISCAL YEAR 2009-10

The following documents are hereby incorporated by reference into Exhibit D of the combined County contract though they may not be physically attached to the contract:

Document 1F:

Reporting Requirement Matrix - County Submission Requirements for

the Department of Alcohol and Drug Programs

Document 1H(a):

Service Code Descriptions

Document 1H(b):

Program Code Listing

Document 1J(b):

DMC Audit Appeals Process

Document 1K:

Drug and Alcohol Treatment Access Report (DATAR)

http://www.adp.ca.gov/datar/manuals/DATARWeb manual.pdf

Document 1P:

Alcohol and/or Other Drug Program Certification Standards

(March 15, 2004)

http://www.adp.ca.gov/Licensing/doc/Alcohol andor Other Drug Progr

am Certification Standards.doc

Document 1V:

Youth Treatment Guidelines

http://www.adp.ca.gov/youth/pdf/Youth Treatment Guidelines.pdf

Document 1W:

Certification Regarding Lobbying

Document 1X:

Disclosure of Lobbying Activities – Standard Form LLL

http://www.whitehouse.gov/omb/grants/sflllin.pdf

Document 2A:

Sobky v. Smoley, Judgment, Signed February 1, 1995

Document 2C:

Title 22, California Code of Regulations

http://ccr.oal.ca.gov

Document 2E:

Drug Medi-Cal Certification Standards for Substance Abuse Clinics

(Updated July 1, 2004)

http://www.adp.ca.gov/dmc/pdf/DMCA Drug Medi-

Cal Certification Standards.pdf

Document 2F:	Standards for Drug Treatment Programs (October 21, 1981)
	http://www.adp.ca.gov/dmc/pdf/DMCA Standards for Drug Treatment Programs.pdf
Document 2J:	Provider Report of Drug Medi-Cal Claims Adjustments (ADP 5035C) – Form/Instructions
Document 2K:	Multiple Billing Override Certification (ADP 7700)
	http://www.adp.ca.gov/dmc/pdf/ADP7700.pdf
Document 2L:	Good Cause Certification (ADP 6065)
	http://www.adp.ca.gov/dmc/pdf/Good Cause Certification.xls
Document 2P:	County Certification - Cost Report Year-End Claim For Reimbursement
Document 2P(a):	Drug Medi-Cal Cost Report Forms – Day Care Rehabilitative – Alcohol and Drug (form and instructions)
Document 2P(b):	Drug Medi-Cal Cost Report Forms – Day Care Rehabilitative – Perinatal (form and instructions)
Document 2P(c):	Drug Medi-Cal Cost Report Forms – Outpatient Drug Free Individual Counseling – Alcohol and Drug (form and instructions)
Document 2P(d):	Drug Medi-Cal Cost Report Forms – Outpatient Drug Free Individual Counseling – Perinatal (form and instructions)
Document 2P(e):	Drug Medi-Cal Cost Report Forms – Outpatient Drug Free Group Counseling – Alcohol and Drug (form and instructions)
Document 2P(f):	Drug Medi-Cal Cost Report Forms – Outpatient Drug Free Group Counseling – Perinatal (form and instructions)
Document 2P(g):	Drug Medi-Cal Cost Report Forms – Residential – Perinatal (form and instructions)
Document 2P(h):	Drug Medi-Cal Cost Report Forms – Narcotic Treatment Program – County – Alcohol and Drug (form and instructions)
Document 2P(i):	Drug Medi-Cal Cost Report Forms – Narcotic Treatment Program – County – Perinatal (form and instructions)
Document 2Y:	Companion Guide for HIPAA 837P Transactions
	http://www.adp.ca.gov/hp/pdf/837P Companion Guide.pdf

Document 3G: California Code of Regulations, Title 9 - Rehabilitation and

Developmental Services, Division 4 - Department of Alcohol and Drug

Programs, Chapter 4 – Narcotic Treatment Programs

http://www.calregs.com

Document 3H: California Code of Regulations, Title 9 - Rehabilitation and

Developmental Services, Division 4 - Department of Alcohol and Drug

Programs, Chapter 8 - Certification of Alcohol and Other Drug

Counselors

http://www.calregs.com

Document 3J: CalOMS Treatment Data Collection Guide

http://www.adp.ca.gov/CalOMS/pdf/CalOMS Data Collection Guide.pdf

Document 3K: Privacy, Confidentiality and Information Security Provisions

Document 3P Companion Guide for 835 HIPAA Transactions

http://www.adp.ca.gov/hp/pdf/835 Companion Guide.pdf

Document 3Q Companion Guide for 276 HIPAA Transactions

http://www.adp.ca.gov/hp/pdf/276 Companion Guide.pdf

Document 3R Companion Guide for 277 HIPAA Transactions

http://www.adp.ca.gov/hp/pdf/277 Companion Guide.pdf

Document 3S CalOMS Treatment Data Compliance Standards

http://www.adp.ca.gov/CalOMS/pdf/CalOMS_Data_Compliance.pdf

Document 3T ADP Local Assistance Funding Matrix

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH

SUBSTANCE ABUSE PREVENTION AND CONTROL

Ongoing Agreements

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Funding		Proposed 2010- 11 Funding		Variance
1	ALCOHOLISM CENTER FOR WOMEN, INC.	1	PH-000685B	Ongoing	ODFC	\$	134,421	\$	134,421	\$0
2	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000686C	General Population	AITRPS (NR)	\$	102,345	\$	102,345	\$0
3	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755A	General Population	AITRPS (NR)	\$	633,128	\$	633,128	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755B	General Population	AITRPS (RES)	\$	989,150	\$	989,150	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755C	Ongoing-Peri	SH (PERI)	\$	62,574	\$	62,574	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755D	Drug Court	ODCTRS (DC)	\$	296,992	\$	296,992	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755F	Ongoing	SH	\$	62,574	\$	62,574	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755G	Ongoing	ODFC	\$	8,370	\$	8,370	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755H	Ongoing	ODFC	\$	35,242	\$	35,242	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755I	Ongoing	ODFC	\$	154,758	\$	154,758	\$0
						\$	2,242,788	\$	2,242,788	\$0
4	AVALON-CARVER COMMUNITY CENTER	2	PH-000726A	Ongoing	ODFC	\$	39,508	\$	39,508	\$0
	AVALON-CARVER COMMUNITY CENTER	2	PH-000726B	Ongoing	ODFC	\$	45,272	\$	45,272	\$0
						\$	84,780	\$	84,780	\$0

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	SUP Contract # Subtype Modality 2009-2010 Funding		2010 Funding	Proposed 2010- 11 Funding		Variance		
5	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000645A	General Population	AITRPS (NR)	\$	268,619	\$	268,619	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000645B	Drug Court	ODCTRS (DC)	\$	150,433	\$	150,433	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000645D	Ongoing	ODFC	\$	145,000	\$	145,000	\$0
	BEHAVIORAL HEALTH SERVICES, INC. ***	4	PH-000645E	Ongoing	ODFC	\$	163,170	\$	163,170	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000645F	Ongoing	ODFC	\$	99,999	\$	99,999	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	1	PH-000645G	Ongoing	ODFC	\$	128,584	\$	128,584	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000645H	Ongoing	ODFC	\$	103,127	\$	103,127	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	3	PH-000645I	Ongoing	ODFC	\$	130,315	\$	130,315	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	3	PH-000645I	Ongoing (Meth Services)	ODFC (MS)	\$	63,329	\$	63,329	\$0
						\$	1,252,576	\$	1,252,576	\$0
6	CALIFORNIA ASSOCIATION OF ALCOHOLIC RECOVERY HOMES	9	PH-001019	Training and Technical Assistance Services (Alcohol a Drug Services)	nd TTAA	\$	60,596	\$	60,596	\$0
7	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710A	Drug Court-Juvenile	ICJDTS	\$	150,000	\$	150,000	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710B	Drug Court-Juvenile	OJDC	\$	161,245	\$	161,245	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710C	Drug Court-Juvenile	RS (JDC)	\$	102,000	\$	102,000	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710D	Drug Court - L.A. Superior	ODCTRS (DDC)	\$	241,922	\$	241,922	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710D	Drug Court	ODCTRS (SCDC)	\$	20,000	\$	18,920	(\$1,080)
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710D	Drug Court	ODCTRS (DC)	\$	297,080	\$	297,080	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710F	Ongoing-Peri	SH (PERI)	\$	44,695	\$	44,695	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710G	General Population	AITRPS (NR)	\$	204,890	\$	204,890	\$0

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	2009-	2010 Funding	posed 2010- I Funding	Variance
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG								
	ABUSE, INC.	1	PH-000710H	General Population	AITRPS (RES)	\$	296,365	296,365	\$0
						\$	1,518,197	\$ 1,517,117	(\$1,080)
8	CANON HUMAN SERVICES, INC.	2	PH-000859A	Ongoing	ODFC	\$	88,997	\$ 88,997	\$0
9	CHILD AND FAMILY CENTER	5	PH-000724A	General Population	AITRPS (NR)	\$	144,081	\$ 144,081	\$0
10	CHILDREN'S HOSPITAL OF LOS ANGELES	3	PH-000899A	General Population	AITRPS (NR)	\$	299,966	\$ 299,966	\$0
	CHILDREN'S HOSPITAL OF LOS ANGELES	3	PH-000899B	Ongoing	ODFC	\$	75,050	\$ 75,050	\$0
	CHILDREN'S HOSPITAL OF LOS ANGELES	3	PH-000899B	Ongoing (Meth Services)	ODFC (MS)	\$	14,431	\$ 14,431	\$0
						\$	389,447	\$ 389,447	\$0
11	CITY OF COMPTON	2	PH-000907A	Ongoing	ODFC	\$	53,525	\$ 53,525	\$0
12	CLARE FOUNDATION, INC.	3	PH-000892A	Drug Court	ODCTRS (DC)	\$	249,526	\$ 249,526	\$0
13	DIDI HIRSCH PSYCHIATRIC SERVICE	2	PH-000725B	General Population	AITRPS (NR)	\$	288,128	\$ 288,128	\$0
	DIDI HIRSCH PSYCHIATRIC SERVICE	2	PH-000725D	Ongoing	ODFC	\$	84,984	\$ 84,984	\$0
	DIDI HIRSCH PSYCHIATRIC SERVICE	1	PH-000725E	Ongoing	ODFC	\$	95,751	\$ 95,751	\$0
						\$	468,863	\$ 468,863	\$0
14	DO IT NOW FOUNDATION	3	PH-000736A	Ongoing	ODFC	\$	17,149	\$ 17,149	\$0
									\$0
15	EL PROYECTO DEL BARRIO	3	PH-000928A	Ongoing-Peri	PODF	\$	224,871	\$ 224,871	\$0
	EL PROYECTO DEL BARRIO	3	PH-000928A	Ongoing-Peri (Meth Services)	PODF (MS)	\$	67,615	\$ 67,615	\$0
	EL PROYECTO DEL BARRIO	3	PH-000928B	Ongoing-Peri	PODF	\$	99,883	\$ 99,883	\$0
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SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Funding	Proposed 2010- 11 Funding	Variance
16	FAMILY SERVICE OF LONG BEACH	4	PH-000715A	Ongoing	ODFC	\$ 17,149	\$ 17,149	\$0
17	HELPLINE YOUTH COUNSELING, INC.	4	PH-000683A	General Population	AITRPS (NR)	\$ 255,648	\$ 255,648	\$0
18	HOMELESS HEALTH CARE LOS ANGELES, INC.	1	PH-000678A	Ongoing	HDC	\$ 229,644	\$ 229,644	\$0
19	I-ADARP, INC.	3	PH-000684A	Ongoing	ODFC	\$ 66,373	\$ 66,373	\$0
20	JOINT EFFORTS, INC.	4	PH-000936A	Ongoing	ODFC	\$ 26,618	\$ 26,618	\$0
21	LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000820A	Ongoing	HDC	\$ 68,331	\$ 68,331	\$0
	LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	1	PH-000820B	Ongoing	ODFC	\$ 45,287	\$ 45,287	\$0
						\$ 113,618	\$ 113,618	\$0
22	MELA COUNSELING SERVICES CENTER, INC.	1	PH-000895A	Ongoing-Peri	PODF	\$ 13,076	\$ 13,076	\$0
23	MID VALLEY RECOVERY SERVICES, INC.	1	PH-000728A	Drug Court	ODCTRS (DC)	\$ 362,296	\$ 362,296	\$0
	MID VALLEY RECOVERY SERVICES, INC.	1	PH-000728B	Ongoing	ODFC	\$ 56,997	\$ 56,997	\$0
						\$ 419,293	\$ 419,293	\$0
24	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	4	PH-000904C	Ongoing-Peri	PODF	\$ 76,373	\$ 76,373	\$0
	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	4	PH-000904D	Ongoing	SH	\$ 44,695	\$ 44,695	\$0
	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE -	4	PH-000904E	Drug Court	ODCTRS (DC)	\$ 408,808	\$ 408,808	\$0
	LONG BEACH AREA	٠			31110 (20)	\$ 529,876		\$0
						,	, -	
25	PACIFIC CLINICS	5	PH-000714A	General Population	AITRPS (NR)	\$ 393,267	\$ 393,267	\$0

ATTACHMENT E

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	2009-	2010 Funding	posed 2010- 1 Funding	Variance
26	PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001008C	Ongoing	ODFC	\$	18,090	\$ 18,090	\$0
27	PHOENIX HOUSES OF LOS ANGELES, INC.	3	PH-000782A	General Population	AITRPS (RES)	\$	1,884,141	\$ 1,884,141	\$0
28	PLAZA COMMUNITY CENTER	1	PH-000721A	Ongoing-Peri	PODF	\$	83,391	\$ 83,391	\$0
29	POMONA COMMUNITY CRISIS CENTER, INC.	1	PH-000860A	Ongoing	ODFC	\$	19,525	\$ 19,525	\$0
30	PRINCIPLES, INC.	1	PH-000870A	Drug Court	ADFLC (DC)	\$	190,000	\$ 190,000	\$0
	PRINCIPLES, INC.	5	PH-000870B	Drug Court	ICDT (DO)	\$	60,098	\$ 60,098	\$0
	PRINCIPLES, INC.	1	PH-000870C	Drug Court	ODCTRS (DC)	\$ 555,366		\$ 555,366	\$0
	PRINCIPLES, INC.	5	PH-000870D	Drug Court	ICDT (DO)	\$	176,858	\$ 176,858	\$0
	PRINCIPLES, INC.	1	PH-000870E	Drug Court	ODCTRS (DC)	\$	683,791	\$ 683,791	\$0
	PRINCIPLES, INC.	5	PH-000870F	Drug Court	RS (DC)	\$	465,089	\$ 465,089	\$0
	PRINCIPLES, INC.	2	PH-000870G	Drug Court	ICDT (DO)	\$	90,581	\$ 90,581	\$0
	PRINCIPLES, INC.	5	РН-000870Н	Ongoing	ODFC	\$	48,702	\$ 48,702	\$0
						\$	2,270,485	\$ 2,270,485	\$0
31	PROTOTYPES	5	PH-001071B	Ongoing	SH	\$	44,695	\$ 44,695	\$0
	PROTOTYPES	1	PH-001071D	Ongoing	ODFC	\$	26,383	\$ 26,383	\$0
	PROTOTYPES	1	PH-001071D	Ongoing	ODFC (RE-ENTRY)	\$	60,000	\$ 60,000	\$0
	PROTOTYPES	1	PH-001071E	Ongoing-Peri	PODF	\$ 30,539		\$ 30,539	\$0
	PROTOTYPES	1	PH-001071F	Ongoing-Peri	PODF	\$	11,709	\$ 11,709	\$0
						\$	173,326	\$ 173,326	\$0
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SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010 Fu	nding	•	posed 2010- l Funding	Variance
32	SANTA ANITA FAMILY SERVICES	5	PH-000905B	Ongoing	ODFC	\$ 1	9,682	\$	19,682	\$0
33	SANTA MONICA BAY AREA DRUG ABUSE COUNCIL	3	PH-000848A	Ongoing	ODFC	\$ 3	2,564	\$	32,564	\$0
34	SHIELDS FOR FAMILIES, INC.	2	PH-000731A	Ongoing	ODFC	\$ 60	3,124	\$	603,124	\$0
	SHIELDS FOR FAMILIES, INC.	2	PH-000731B	Ongoing-Peri	SH (PERI)	\$ 4	4,695	\$	44,695	\$0
	SHIELDS FOR FAMILIES, INC.	2	PH-000731C	Ongoing-Peri	SH (PERI)	\$ 4	4,695	\$	44,695	\$0
	SHIELDS FOR FAMILIES, INC.	2	PH-000731E	General Population	AITRPS (NR)	\$ 20	4,890	\$	204,890	\$0
	SHIELDS FOR FAMILIES, INC.	2	PH-000731F	Drug Court	ODCTRS (DC)	\$ 42	7,607	\$	427,607	\$0
	SHIELDS FOR FAMILIES, INC.	2	PH-000731G	Ongoing	ODFC	\$	-	\$	-	\$0
						\$ 1,32	5,011	\$	1,325,011	\$0
35	SOLEDAD ENRICHMENT ACTION	3	PH-000876A	Ongoing	ODFC	\$ 1	0,976	\$	10,976	\$0
36	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	2	PH-000759A	Ongoing	SH	\$ 10	0,000	\$	100,000	\$0
37	SOUTH BAY HUMAN SERVICES COALITION	4	PH-000847A	Ongoing	ODFC	\$ 3	2,564	\$	32,564	\$0
38	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000762A	Drug Court	ODCTRS (DC)	\$ 28	5,871	\$	285,871	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000762B	Ongoing	SH	\$ 4	4,695	\$	44,695	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	1	PH-000762C	Ongoing	ODFC	\$ 17	0,818	\$	170,818	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000762D	Ongoing	ODFC	\$ 9	8,832	\$	98,832	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000762E	Ongoing	ODFC	\$ 6	9,114	\$	69,114	\$0

#	Agency	SUP	Contract #	Subtype	Modality	2009-2010	Funding	•	osed 2010- Funding	Variance
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000762F	Ongoing-Peri	PODF	\$ \$	67,638 736,968		67,638	\$0 \$0
39	SPECIAL SERVICE FOR GROUPS	1	PH-000933C	General Population	AITRPS (RES)	\$ \$	27,571		736,968 27,571	\$0 \$ 0
37	SPECIAL SERVICE FOR GROUPS	2	PH-000933D	General Population	AITRPS (NR)	\$	399,000		399,000	\$0
				•	, ,	\$	426,571	\$	426,571	\$0
40	SPIRITT FAMILY SERVICES, INC.	4	PH-000792D	Ongoing	ODFC	\$	17,149	\$	17,149	\$0
	SPIRITT FAMILY SERVICES, INC.	5	PH-000792G	General Population	AITRPS (NR)	\$	179,279		179,279	\$0
41	SUNRISE COMMUNITY COUNSELING CENTER	1	PH-000891A	Ongoing	ODFC	\$ \$	196,428 32,948		196,428 32,948	\$0 \$0
42	TARZANA TREATMENT CENTER	5	PH-001014A	General Population	AITRPS (NR)	\$	107,511	\$	107,511	\$0
	TARZANA TREATMENT CENTER	3	PH-001014B	General Population	AITRPS (NR)	\$	470,049	\$	470,049	\$0
	TARZANA TREATMENT CENTER	3	PH-001014C	Dual Diagnosis	AITRPS (RES)	\$	547,157	\$	547,157	\$0
	TARZANA TREATMENT CENTER	3	PH-001014C	General Population	AITRPS (RES)	\$	347,525	\$	347,525	\$0
	TARZANA TREATMENT CENTER	5	PH-001014D	Drug Court	ODCTRS (DC)	\$	97,553	\$	97,553	\$0
	TARZANA TREATMENT CENTER	5	PH-001014E	Ongoing-Peri	SH (PERI)	\$	146,910	\$	146,910	\$0
	TARZANA TREATMENT CENTER	5	PH-001014F	Drug Court	ODCTRS (DC)	\$	543,986	\$	543,986	\$0
	TARZANA TREATMENT CENTER	3	PH-001014G	Drug Court	ADFLC (DC)	\$	64,865	\$	64,865	\$0
	TARZANA TREATMENT CENTER	3	PH-001014H	Drug Court	RS (DC)	\$	84,376	\$	84,376	\$0
	TARZANA TREATMENT CENTER	3	PH-001014I	Ongoing	ODFC	\$	212,836	\$	212,836	\$0
	TARZANA TREATMENT CENTER	3	PH-001014I	Dual Diagnosis	ODFC (DUAL DIAGNOSIS)	\$	212,836	\$	212,836	\$0
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SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype Modality		2009-2010 Funding		oposed 2010- 1 Funding	Variance
	TARZANA TREATMENT CENTER	5	PH-001014J	Ongoing-Peri	PODF	\$	64,020	\$ 64,020	\$0
	TARZANA TREATMENT CENTER	4	PH-001014K	Ongoing-Peri	PODF	\$	30,528	\$ 30,528	\$0
						\$	2,930,152	\$ 2,930,152	\$0
43	URDC HUMAN SERVICES CORPORATION	5	PH-000788A	Ongoing	ODFC	\$	34,936	\$ 34,936	\$0
44	VERDUGO MENTAL HEALTH CENTER	5	PH-000675B	Ongoing	ODFC	\$	13,062	\$ 13,062	\$0
45	WATTS HEALTHCARE CORPORATION	2	PH-000791A	Ongoing	SH	\$	44,695	\$ 44,695	\$0
	WATTS HEALTHCARE CORPORATION	2	PH-000791D	Ongoing	ODFC	\$	28,895	\$ 28,895	\$0
	WATTS HEALTHCARE CORPORATION	2	PH-000791E	Ongoing	ODFC	\$	54,176	\$ 54,176	\$0
						\$	127,766	\$ 127,766	\$0
						\$	19,732,808	\$ 19,731,728	(\$1,080)

SUBSTANCE ABUSE PREVENTION AND CONTROL

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#	Agency	SUP	Contract #	Subtype	Modality		rent 2009- D Funding	_	osed 2010- Funding	Variance
1	ALCOHOL DRUG COUNCIL - HIGH GAIN PROJECT	3	PH-000897A	Prevention	ADPS	\$	56,560		56,560	\$0
2	ALCOHOLISM CENTER FOR WOMEN, INC.	1	PH-000685A	Prevention	ADPS	\$	105,378	\$	105,378	\$0
	ALCOHOLISM CENTER FOR WOMEN, INC.	1	PH-000685C	Prevention	ADPS	\$	95,920	\$	95,920	\$0
						\$	201,298	\$	201,298	\$0
3	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000686A	Prevention	ADPS	\$	52,359	\$	52,359	\$0
	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000686A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	21,100	\$	21,100	\$0
	ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	5	PH-000686B	Prevention	ADPS	\$	57,829	\$	57,829	\$0
						\$	131,288	\$	131,288	\$0
4	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755E	Prevention	ADPS	\$	373,096	\$	373,096	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755E	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	23,037	\$	23,037	\$0
	ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	2	PH-000755E	Prevention Project	ADPS-PP	\$	125,000	\$	125,000	\$0
						\$	521,133	\$	521,133	\$0
5	AVALON-CARVER COMMUNITY CENTER	2	PH-000726C	Prevention	ADPS	\$	123,555	\$	123,555	\$0
6	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000645C	Prevention	ADPS	\$	218,235	\$	218,235	\$0
7	BRIDGE FOCUS, INC., DBA: POSITIVES ALTERNATIVES FOR YOUTH	3	PH-000865A	Prevention	ADPS	\$	158,067	\$	158,067	\$0
	BRIDGE FOCUS, INC., DBA: POSITIVES ALTERNATIVES FOR YOUTH	3	PH-000865B	Prevention	ADPS	\$	111,674	\$	111,674	\$0
	BRIDGE FOCUS, INC., DBA: POSITIVES ALTERNATIVES FOR YOUTH	3	PH-000865C	Prevention	ADPS	\$	59,562	\$	59,562	\$0
	BRIDGE FOCUS, INC., DBA: POSITIVES ALTERNATIVES FOR YOUTH	3	PH-000865D	Prevention	ADPS	\$	19,929	\$	19,929	\$0
						\$	349,232	\$	349,232	\$0

	Pro	evention Aç	reements					_		
#	Agency	SUP	Contract #	Subtype	Modality		rent 2009- 0 Funding	•	osed 2010- Funding	Variance
8	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710E	Prevention	ADPS	\$	192,420	\$	192,420	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710E	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	23,227	\$	23,227	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710I	Prevention	ADPS	\$	104,964	\$	104,964	\$0
	CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	1	PH-000710J	Prevention	ADPS	\$	95,915	\$	95,915	\$0
						\$	416,526	\$	416,526	\$0
9	CALIFORNIA WOMEN'S COMMISSION ON ADDICTIONS	2	PH-000717A	Prevention	ADPS	\$	34,434	\$	34,434	\$0
	CALIFORNIA WOMEN'S COMMISSION ON ADDICTIONS	2	PH-000717B	Prevention	ADPS	\$	55,341	\$	55,341	\$0
						\$	89,775	\$	89,775	\$0
10	CAMBODIAN ASSOCIATION OF AMERICA	4	PH-000862A	Prevention	ADPS	\$	34,434	\$	34,434	\$0
	CAMBODIAN ASSOCIATION OF AMERICA	4	PH-000862A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	25,237	\$	25,237	\$0
	CAMBODIAN ASSOCIATION OF AMERICA	4	PH-000862B	Prevention	ADPS	\$	82,525	\$	82,525	\$0
						\$	142,196	\$	142,196	\$0
11	CASA DE HERMANDAD, INC.	1	PH-000803A	Prevention	ADPS	\$	197,017	\$	197,017	\$0
12	CITY OF PASADENA	5	PH-000947A	Prevention	ADPS	\$	202,337	\$	202,337	\$0
13	CLARE FOUNDATION, INC.	2	PH-000892B	Prevention	ADPS	\$	317,102	\$	317,102	\$0
14	CLINICA MONSENOR OSCAR A. ROMERO	1	PH-000713A	Prevention	ADPS	\$	111,859	¢	111,859	\$0
14		•								
	CLINICA MONSENOR OSCAR A. ROMERO	1	PH-000713B	Prevention	ADPS	\$ \$	121,185 233,044		121,185 233,044	\$0 \$0
						Ф	233,044	Ф	233,044	φU
15	COMMUNITY COALITION FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT	2	PH-000944A	Prevention	ADPS	\$	209,044	\$	209,044	\$0
	COMMUNITY COALITION FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT	2	PH-000944B	Prevention	ADPS	\$	26,305	\$	26,305	\$0
						\$	235,349	\$	235,349	\$0
16	DAY ONE	5	PH-000718A	Prevention	ADPS	\$	139,363	\$	139,363	\$0

#	Agency	SUP	Contract #	Subtype	Modality	ent 2009- Funding	•	osed 2010- Funding	Variance	
	DAY ONE	5	PH-000718A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$ 20,000	\$	20,000	\$0	
				,	,	\$ 159,363	\$	159,363	\$0	
17	DIDI HIRSCH PSYCHIATRIC SERVICE	2	PH-000725A	Prevention	ADPS	\$ 343,690	\$	364,445	\$20,755	
	DIDI HIRSCH PSYCHIATRIC SERVICE	2	PH-000725C	Prevention	ADPS	\$ 20,755	\$	-	(\$20,755)	
						\$ 364,445	\$	364,445	\$0	
18	EL CENTRO DEL PUEBLO	1	PH-000719A	Prevention	ADPS	\$ 51,767	\$	51,767	\$0	
	EL CENTRO DEL PUEBLO	1	PH-000719B	Prevention	ADPS	\$ 76,496	\$	76,496	\$0	
						\$ 128,263	\$	128,263	\$0	
19	HAVEN HOUSE, INC.	5	PH-000939A	Prevention	ADPS	\$ 141,637	\$	141,637	\$0	
20	HIS SHELTERING ARMS, INC.	2	PH-000849A	Prevention	ADPS	\$ 112,047	\$	112,047	\$0	
21	INDIAN ALCOHOLISM COMMISSION OF LOS ANGELES, INC.	1	PH-000687A	Prevention	ADPS	\$ 44,499	\$	44,499	\$0	
22	JEWISH FAMILY SERVICE OF LOS ANGELES	2	PH-000889A	Prevention	ADPS	\$ 31,176	\$	31,176	\$0	
23	JUVENILE ASSISTANCE DIVERSION EFFORT	1	PH-000694A	Prevention	ADPS	\$ 61,403	\$	61,403	\$0	
24	KOREATOWN YOUTH AND COMMUNITY CENTER, INC.	2	PH-000705A	Prevention	ADPS	\$ 34,787	\$	34,787	\$0	
	KOREATOWN YOUTH AND COMMUNITY CENTER, INC.	2	PH-000705A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$ 8,695	\$	8,695	\$0	
				Set rices)	SERVICES)	\$ 43,482	\$	43,482	\$0	

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality		rent 2009- D Funding	_	osed 2010- Funding	Variance
25	LOS ANGELES GAY AND LESBIAN COMMUNITY SERVICE CENTER	3	PH-000688A	Prevention	ADPS	\$	90,889	\$	90,889	\$0
	LOS ANGELES GAY AND LESBIAN COMMUNITY SERVICE CENTER	3	PH-000688A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	67,116	\$	67,116	\$0
	LOS ANGELES GAY AND LESBIAN COMMUNITY SERVICE CENTER	3	PH-000688B	Prevention	ADPS	\$	81,847	\$	81,847	\$0
	LOS ANGELES GAY AND LESBIAN COMMUNITY SERVICE CENTER	3	PH-000688C	Prevention	ADPS	\$	95,729	\$	95,729	\$0
						\$	335,581	\$	335,581	\$0
26	LOS ANGELES YOUTH NETWORK	3	PH-000745A	Prevention	ADPS	\$	68,725	\$	68,725	\$0
	LOS ANGELES YOUTH NETWORK	3	PH-000745A	Prevention (Meth	ADPS (METH	\$	17,180	\$	17,180	\$0
				Services)	SERVICES)	\$	85,905	\$	85,905	\$0
27	MINI TWELVE STEP HOUSE, INC.	2	PH-000903A	Prevention	ADPS	\$	180,019	\$	180,019	\$0
28	MJB TRANSITIONAL RECOVERY, INC.	2	PH-001009A	Prevention	ADPS	\$	156,817	\$	156,817	\$0
20		_	111 00100711	110,0111011	11010	Ψ	100,017	Ψ	150,017	Ψ0
29	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	4	PH-000904A	Prevention	ADPS	\$	120,863	\$	120,863	\$0
	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	4	PH-000904B	Prevention Project	ADPS-PP	\$	99,228	\$	99,228	\$0
						\$	220,091	\$	220,091	\$0
30	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMONA VALLEYS, INC.	5	PH-000716A	Prevention	ADPS	\$	126,024	\$	126,024	\$0
31	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY, INC.	5	PH-000850A	Prevention	ADPS	\$	50,478	\$	50,478	\$0
	NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY, INC.	3	PH-000850B	Prevention	ADPS	\$	80,229	\$	80,229	\$0
	7.11.21, 1.10.					\$	130,707	\$	130,707	\$0
32	NEW DIRECTIONS FOR YOUTH, INC.	3	PH-000886A	Prevention	ADPS	\$	79,034	\$	79,034	\$0
	NEW DIRECTIONS FOR YOUTH, INC.	3	PH-000886B	Prevention	ADPS	\$	22,874	\$	22,874	\$0
						\$	101,908	\$	101,908	\$0
33	NORTHEAST VALLEY HEALTH CORPORATION	3	PH-000743A	Prevention	ADPS	\$	76,519	\$	76,519	\$0
	NORTHEAST VALLEY HEALTH CORPORATION	3	PH-000743B	Prevention	ADPS	\$	106,404	\$	106,404	\$0
	L:\TEAM A\Esther\#01432.Renewals.FY10-11\Final Bd.Ltr\Final BL attachments\Attachment F	4 of 7				\$	182,923	\$	182,923 5/19/2010	\$0

#	Agency	SUP	Contract #	Subtype	Modality	rent 2009- D Funding	•	osed 2010- Funding	Variance
34	PACIFIC CLINICS	1	PH-000714B	Prevention	ADPS	\$ 181,778	\$	181,778	\$0
	PACIFIC CLINICS	1	PH-000714B	Prevention (Meth Services)	ADPS (METH SERVICES)	\$ 25,531	\$	25,531	\$0
						\$ 207,309	\$	207,309	\$0
35	PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001008A	Prevention	ADPS	\$ 103,008	\$	103,008	\$0
	PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001008A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$ 35,150	\$	35,150	\$0
	PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	2	PH-001008B	Prevention	ADPS	\$ 152,332	\$	152,332	\$0
						\$ 290,490	\$	290,490	\$0
36	PEOPLE IN PROGRESS, INC.	3	PH-000852A	Prevention	ADPS	\$ 66,926	\$	66,926	\$0
	PEOPLE IN PROGRESS, INC.	1	PH-000852B	Prevention	ADPS	\$ 310,785	\$	310,785	\$0
						\$ 377,711	\$	377,711	\$0
37	PROTOTYPES	1	H-801648A	Prevention	ADPS	\$ 95,240	\$	95,240	\$0
38	PUEBLO Y SALUD, INC.	3	PH-000723A	Prevention	ADPS	\$ 160,267	\$	160,267	\$0
39	SAN FERNANDO VALLEY PARTNERSHIP, INC.	3	PH-000681A	Prevention	ADPS	\$ 136,518	\$	136,518	\$0
	SAN FERNANDO VALLEY PARTNERSHIP, INC.	3	PH-000681A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$ 20,000	\$	20,000	\$0
				,	,	\$ 156,518	\$	156,518	\$0
40	SANTA ANITA FAMILY SERVICES	5	PH-000905A	Prevention	ADPS	\$ 74,047	\$	74,047	\$0

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	Current 2009- 2010 Funding				Proposed 2010- 11 Funding		Variance
41	SEARCH TO INVOLVE PILIPINO AMERICANS	1	PH-000682A	Prevention	ADPS	\$	79,669	\$	79,669	\$0		
	SEARCH TO INVOLVE PILIPINO AMERICANS	1	PH-000682A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	19,915	\$	19,915	\$0		
						\$	99,584	\$	99,584	\$0		
42	SHIELDS FOR FAMILIES, INC.	2	PH-000731D	Prevention	ADPS	\$	320,820	\$	320,820	\$0		
43	SOCIAL MODEL RECOVERY SYSTEMS, INC.	5	PH-000925A	Prevention	ADPS	\$	317,929	\$	317,929	\$0		
43	SOCIAL MODEL RECOVERY SYSTEMS, INC.	5	PH-000925B	Prevention	ADPS	\$	24,884	\$	24,884	\$0		
	SOCIAL MODEL RECOVERY SYSTEMS, INC.	5	PH-000925C	Prevention	ADPS	\$	48,302	\$	48,302	\$0		
						\$	391,115	\$	391,115	\$0		
44	SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	4	PH-000759B	Prevention	ADPS	\$	131,853	\$	131,853	\$0		
45	SOUTH BAY CHILDREN'S HEALTH CENTER	4	PH-000677A	Prevention	ADPS	\$	105,378	\$	105,378	\$0		
	SOUTH BAY CHILDREN'S HEALTH CENTER	4	PH-000677A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	20,000	\$	20,000	\$0		
				230.13032)	,	\$	125,378	\$	125,378	\$0		
46	SPECIAL SERVICE FOR GROUPS	1	PH-000933A	Prevention	ADPS	\$	22,874	\$	22,874	\$0		
	SPECIAL SERVICE FOR GROUPS	1	PH-000933A	Prevention (Meth Services - The Wall)	ADPS (MS- WALL)	\$	90,000	\$	90,000	\$0		
	SPECIAL SERVICE FOR GROUPS	1	PH-000933A	Prevention (Meth Services)	ADPS (METH SERVICES)	\$	50,000	\$	50,000	\$0		
	SPECIAL SERVICE FOR GROUPS	1	PH-000933B	Prevention	ADPS	\$	62,357	\$	62,357	\$0		
						\$	225,231	\$	225,231	\$0		

SUBSTANCE ABUSE PREVENTION AND CONTROL

#	Agency	SUP	Contract #	Subtype	Modality	rrent 2009- 10 Funding	_	posed 2010- L Funding	Variance
47	SPIRITT FAMILY SERVICES, INC.	5	PH-000792A	Prevention	ADPS	\$ 68,336	\$	68,336	\$0
	SPIRITT FAMILY SERVICES, INC.	1	PH-000792B	Prevention	ADPS	\$ 119,370	\$	119,370	\$0
	SPIRITT FAMILY SERVICES, INC.	1	PH-000792C	Prevention	ADPS	\$ 121,579	\$	121,579	\$0
	SPIRITT FAMILY SERVICES, INC.	1	PH-000792E	Prevention	ADCP	\$ 87,186	\$	87,186	\$0
	SPIRITT FAMILY SERVICES, INC.	1	PH-000792E	Prevention (Meth Services)	ADCP (MEDIA PROJECT - MS)	\$ 21,000	\$	21,000	\$0
	SPIRITT FAMILY SERVICES, INC.	4	PH-000792F	Prevention	ADPS	\$ 181,778		181,778	\$0
						\$ 599,249	\$	599,249	\$0
48	THE LOS ANGELES FREE CLINIC, DBA: THE SABAN FREE CLINIC	3	PH-000744A	Prevention	ADPS	\$ 105,378	\$	105,378	\$0
49	TWIN PALMS RECOVERY CENTER	1	PH-000866A	Prevention	ADPS	\$ 167,689	\$	167,689	\$0
50	UNITED AMERICAN INDIAN INVOLVEMENT, INC.	1	PH-000902A	Prevention	ADPS	\$ 22,874	\$	22,874	\$0
51	VALLEY WOMEN'S CENTER, INC.	5	PH-000676A	Prevention	ADPS	\$ 126,748	\$	126,748	\$0
52	VERDUGO MENTAL HEALTH CENTER	5	PH-000675A	Prevention	ADPS	\$ 87,445	\$	87,445	\$0
53	VOLUNTEERS OF AMERICA OF LOS ANGELES	2	PH-000838A	Prevention	ADPS	\$ 90,889	\$	90,889	\$0
	VOLUNTEERS OF AMERICA OF LOS ANGELES	1	PH-000838B	Prevention	ADPS	\$ 337,930	\$	337,930	\$0
						\$ 428,819	\$	428,819	\$0
54	WATTS HEALTHCARE CORPORATION	2	PH-000791B	Prevention	ADPS	\$ 131,723	\$	131,723	\$0
	WATTS HEALTHCARE CORPORATION	2	PH-000791C	Prevention	ADPS	\$ 142,086	\$	142,086	\$0
						\$ 273,809	\$	273,809	\$0
						\$ 10,508,511	\$	10,508,511	

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH

SUBSTANCE ABUSE PREVENTION AND CONTROL

Parolee Services Network Agreements

#	Agency	SUP	J	Subtype	Modality	rent 2009-) Funding	2	roposed 2010-11 Cunding	Variance
1	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000648A	Parolee Services Network	ODFC (PSN)	\$ 47,328	\$	47,328	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000648B	Parolee Services Network	RS (PSN)	\$ 155,286	\$	155,286	\$0
	BEHAVIORAL HEALTH SERVICES, INC.	2	PH-000648C	Parolee Services Network	ADFLC (PSN)	\$ 19,580	\$	19,580	\$0
						\$ 222,194	\$	222,194	\$0
2	CRI-HELP, INC.	1	PH-000666A	Parolee Services Network	ODFC (PSN)	\$ 47,328	\$	47,328	\$0
	CRI-HELP, INC.	1	PH-000666B	Parolee Services Network	RS (PSN)	\$ 155,286	\$	155,286	\$0
	CRI-HELP, INC.	1	PH-000666C	Parolee Services Network	ADFLC (PSN)	\$ 19,580	\$	19,580	\$0
						\$ 222,194	\$	222,194	\$0
3	PHOENIX HOUSES OF LOS ANGELES, INC.	3	PH-000787A	Parolee Services Network	ODFC (PSN)	\$ 47,328	\$	47,328	\$0
	PHOENIX HOUSES OF LOS ANGELES, INC.	3	PH-000787B	Parolee Services Network	RS (PSN)	\$ 155,286	\$	155,286	\$0
	PHOENIX HOUSES OF LOS ANGELES, INC.	2	PH-000787C	Parolee Services Network	ADFLC (PSN)	\$ 19,580	\$	19,580	\$0
						\$ 222,194	\$	222,194	\$0
4	SALVATION ARMY, A CALIFORNIA CORPORATION	1	PH-000987A	Parolee Services Network	ODFC (PSN)	\$ 47,328	\$	47,328	\$0
	SALVATION ARMY, A CALIFORNIA CORPORATION	1	PH-000987B	Parolee Services Network	RS (PSN)	\$ 155,286	\$	155,286	\$0
	SALVATION ARMY, A CALIFORNIA CORPORATION	1	PH-000987C	Parolee Services Network	ADFLC (PSN)	\$ 19,580	\$	19,580	\$0
						\$ 222,194	\$	222,194	\$0
5	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000661A	Parolee Services Network	ODFC (PSN)	\$ 47,328	\$	47,328	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000661B	Parolee Services Network	RS (PSN)	\$ 155,286	\$	155,286	\$0
	SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	4	PH-000661C	Parolee Services Network	ADFLC (PSN)	\$ 19,580	\$	19,580	\$0
				1.00WOIR		\$ 222,194	\$	222,194	\$0

Parolee Services Network Agreements

#	Agency	SUP	Contract #	Subtype	Modality		Current 2009- 2010 Funding												Current 2009- 2010 Funding						010 Funding						2010-11 Funding	Variance
6	SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000662A	Parolee Services Network	ODFC (PSN)	\$	47,328	\$	47,328	\$0																						
	SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000662B	Parolee Services Network	RS (PSN)	\$	155,286	\$	155,286	\$0																						
	SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	4	PH-000662C	Parolee Services Network	ADFLC (PSN)	\$	19,580	\$	19,580	\$0																						
						\$	222,194	\$	222,194	\$0																						
						\$	1,333,164	\$	1,333,164																							

Evaluation Services Agreements

#	Agency	Agency SUP		SUP Contract # Subtype		rent 2009- Funding	Proposed 2010- 11 Funding		Variance	
1	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	ADSA	ADSA (ES)	\$ 466,378	\$	761,671	\$	295,293
	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	Womens Re-Entry Program	ADSA (ES-RE-ENTRY)	\$ 51,697	\$	51,696		\$0
	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	PROP36	ADSA (ES-P36)	\$ 22,912	\$	-	\$	(22,912)
	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	PROP36	ADSA (ES-JAG/OTP)	\$ 54,764	\$	54,764		\$0
	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	ADSA - CODCP	ADSA (ES-CODCP)	\$ 55,910	\$	55,910	\$	-
	THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	3	PH-000179-2A-2	ADSA - SBIRT	ADSA (ES-SBIRT)	\$ 155,488	\$	-	\$	(155,488)
						\$ 807,149	\$	924,041		\$116,893

Drug Testing Services Agreements

#	Agency	SUP	Contract #	Subtype	Modality	Current 2009- 1	Proposed 2010- 11 Funding	Variance
1	LABORATORY CORPORATION OF AMERICA	Out of County	PH-001022A	Drug Testing	DTS	\$ 2,000,000	\$ 2,000,000	

COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH SUBSTANCE ABUSE PREVENTION AND CONTROL FUNDING SUMMARY - 2010 CONTRACT RENEWAL

	# of Contracts	Federal		Special Fund	Other Revenue	Intrafund	Net County Cost	2010-11	Federal	State	Special Fund	Other Revenue	Intrafund	Net County Cost	2011-12
ATTACHMENT A	47 CalWORKs					9,885,062		9,885,062	:						
ATTACHMENT B	14 DCFS					2,503,668		2,503,668	8				2,503,668	3	2,503,668
ATTACHMENT C	⁵⁹ GR					6,446,497	4919	98 6,495,695	;				6,446,497	49198	6,495,695
ATTACHMENT D	4 FDDC		893,617					893,617		893,617	,				893,617
ATTACHMENT E	45 ONGOING	11,508,189	5,604,980	60,596	3	1,011,391	1,546,5	72 19,731,728	11,508,189	5,604,980	60,59	6	1,011,391	1,546,572	19,731,728
ATTACHMENT F	54 PREVENTION	\$ 9,758,757		749754	ļ			10,508,511							
ATTACHMENT G	6 PSN		1,333,164					1,333,164							
ATTACHMENT H	¹ EVALUATION	824,247	54,764			45030		924,041							
ATTACHMENT I	1 DTS	2,000,000						2,000,000	·						
	231 TOTAL	24,091,193	7,886,525	810,350	0	19,891,648	1,595,7	70 54,275,486	11,508,189	6,498,597	60,59	6	0 9,961,556	1,595,770	29,624,708

Agency Name	Executive Director	Agency Address	Agency City	Agency State	Agency Zin	Agency Phone	Agency Fax
ALCOHOL DRUG COUNCIL - HIGH GAIN PROJECT	Jayne K.Wise	1424 Fourth Street, Suite 205	Santa Monica	CA	90401	(310) 451-5881	(310) 576-0945
ALCOHOLISM CENTER FOR WOMEN, INC.	Lorette Herman	1147 South Alvarado Street	Los Angeles	CA	90006	(213) 381-8500	(213) 381-8525
ALCOHOLISM COUNCIL OF ANTELOPE VALLEY/NCA	Clancy Corbet	311 East Avenue, K-4	Lancaster	CA	93535	(661) 948-5046	(661) 948-5049
ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.	Mike Watanabe, MSW	2900 Crenshaw Boulevard	Los Angeles	CA	90016	(323) 293-6284	(323) 295-4075
AVALON-CARVER COMMUNITY CENTER	Lawrence E. Rodgers	4920 South Avalon Boulevard	Los Angeles	CA	90011	(323) 232-4391	(323) 234-1008
BEACON HOUSE ASSOCIATION OF SAN PEDRO (THE)	Luis M. Lozano	P.O Box 328, 1003 South Beacon Street,	San Pedro	CA	90731	(310) 514-4940	(310) 831-0070
BEHAVIORAL HEALTH SERVICES, INC.	Henry van Oudheusden, MA, MSW	15519 South Crenshaw Boulevard	Gardena	CA	90249	(310) 679-9126	(310) 679-2920
BRIDGE FOCUS, INC., DBA: POSITIVES ALTERNATIVES FOR YOUTH	Anthony Robles	14418 Chase Street, Suite 205	Panorama City	CA	91402- 3022	(818) 895-5132	(818) 895-5135
CALIFORNIA ASSOCIATION OF ALCOHOLIC RECOVERY HOMES	Susan Blacksher	2400 Marconi Ave., Suite C	Sacramento	CA	95821	(916) 338-9460	(916) 339-9468
CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.	James Z. Hernandez	2101 Capitol Avenue	Sacramento	CA	95816	(916) 443-5473	(916) 443-1732
CALIFORNIA WOMEN'S COMMISSION ON ADDICTIONS	Patricia Fortuny	1010 Sycamore Avenue, Suite 211	South Pasadena	CA	91030	(323) 474-0894, 310-404-9284	(323) 474-0896
CAMBODIAN ASSOCIATION OF AMERICA	Kimthai Kuoch	2390 Pacific Avenue	Long Beach	CA	90806	(562) 988-1863	(562) 988-1475
CANON HUMAN SERVICES, INC.	Barbara Butler	9705 South Holmes Avenue	Los Angeles	CA	90002	(323) 249-9097	(323) 249-9121
CASA DE HERMANDAD, INC.	David Abelar	11750 West Pico Boulevard	Los Angeles	CA	90064	(310) 477-8272	(310) 473-9591
CASA DE LAS AMIGAS	Doreen Garcia	160 North El Molino Avenue	Pasadena	CA	91101	(626) 792-2770	(626) 792-5826
CHABAD OF CALIFORNIA, INC.	Rabbi Boruch Shlomo Cunin	5675 West Olympic Boulevard	Los Angeles	CA	90036	(323) 965-1365	(323) 965-0444
CHILD AND FAMILY CENTER	Darrell Paulk	21545 Centre Pointe Parkway	Santa Clarita	CA	91350	(661) 259-9439	(661) 255-6853
CHILDREN'S HOSPITAL OF LOS ANGELES	Susan Robinovitz, R.N., M.A.	P.O. Box 27980, Mail Stop #2	Los Angeles	CA	90027- 0980	(323) 669-2463	(323) 913-3614
CITY OF COMPTON	Sheila Fenderson	404 North Alameda Street	Compton	CA	90221	(310) 605-5693	(310) 639-5260
CITY OF PASADENA	Takashi Wada, M.D., M.P.H.; CC: Joy Guihama, Division	1845 North Fair Oaks Avenue, Room 1110	Pasadena	CA	91103	(626) 744-6005	(626) 744-6113

Agency Name	Executive Director	Agency Address	Agency City	Agency State	Agency Zin	Agency Phone	Agency Fax
CLARE FOUNDATION, INC.	Nicholas Vrataric	1871 9th Street	Santa Monica	CA	90404	(310) 314-6200	(310) 396-6974
CLINICA MONSENOR OSCAR A. ROMERO	Grace Floutsis, M.D.	123 South Alvarado Street	Los Angeles	CA	90057- 2201	(213) 989-7700	(213) 989-7701
COMMUNITY COALITION FOR SUBSTANCE ABUSE PREVENTION AND TREATMENT	Marqueece Harris- Dawson	8101 South Vermont Avenue	Los Angeles	CA	90044	(323) 750-9087	(323) 750-9640
CRI-HELP, INC.	Jack S. Bernstein	11027 Burbank Boulevard	North Hollywood	CA	91601	(818) 985-8323	(818) 506-7066
DAY ONE	Christy Zamani	175 North Euclid Avenue	Pasadena	CA	91101	(626) 229-9750	(626) 792-8056
DIDI HIRSCH PSYCHIATRIC SERVICE	Kita S. Curry, Ph.D.	4760 South Sepulveda Boulevard	Culver City	CA	90230	(310) 390-6612	(310) 398-5690
DO IT NOW FOUNDATION	Frank Peckous	6115 Selma Avenue, Suite 100	Hollywood	CA	90028	(323) 465-3784	(323) 465-3899
EL CENTRO DEL PUEBLO	Sandra L. Figueroa	1157 Lemoyne Street	Los Angeles	CA	90026	(213) 483-6335	(213) 483-5523
EL PROYECTO DEL BARRIO	Corinne Sanchez	8902 Woodman Avenue	Arleta	CA	91331	(818) 895-2206	(818) 830-7280
FAMILY SERVICE OF LONG BEACH	Damian Zavala	5500 East Atherton Street, Suite 316	Long Beach	CA	90815	(562) 493-3201	(562) 493-3753
GRANDVIEW FOUNDATION, INC.	Lindy Carll	P.O. Box 40375	Pasadena	CA	91104 - 0375	(626) 797-1124	(626) 398-9674
HAVEN HOUSE, INC.	Sheila Halfon	P.O. Box 50007	Pasadena	CA	91115	(626) 564-8880	(626) 564-9348
HELPLINE YOUTH COUNSELING, INC.	Jeffrey S. Farber	12440 East Firestone Boulevard, Suite 1000	Norwalk	CA	90650	(562) 864-3722	(562) 864-4596
HIS SHELTERING ARMS, INC.	Lilliam Jeffries	11101 South Main Street	Los Angeles	CA	90061	(323) 755-6646	(323) 777-2209
HOMELESS HEALTH CARE LOS ANGELES, INC.	Mark Casanova	2330 Beverly Boulevard	Los Angeles	CA	90057	(213) 744-0724	(213) 748-2432
HOUSE OF HOPE FOUNDATION, INC.	Barbara Tschirgi	P.O. Box 921	San Pedro	CA	90733	(310) 521-9209	(310) 521-9241
I-ADARP, INC.	Renee Stewart	6740 Kester Avenue, Suite 200	Van Nuys	CA	91405	(818) 994-7454	(818) 994-1767
INDIAN ALCOHOLISM COMMISSION OF LOS ANGELES, INC.	Kimberly Smith	1125 West 6th Street, Suite 103	Los Angeles	CA	90017	(213) 995-1466	(213) 995-1467
JEWISH FAMILY SERVICE OF LOS ANGELES	Paul S. Castro	6505 Wilshire Boulevard, Suite 500	Los Angeles	CA	90048	(323) 761-8800	(323) 761-8801
JOINT EFFORTS, INC.	Henry van Oudheusden, MA, MSW	505 South Pacific Avenue, Suite 205	San Pedro	CA	90731	(310) 831-2358	(310) 831-2356
JUVENILE ASSISTANCE DIVERSION EFFORT	Marcos S. Vega	3071 Firestone Boulevard	South Gate	CA	90280	(323) 564-5233	(323) 567-2653

Agency Name	Executive Director	Agency Address	Agency City	Agency State	Agency Zin	Agency Phone	Agency Fax
KOREATOWN YOUTH AND COMMUNITY CENTER, INC.	Johng Ho Song	3727 West 6th Street, Suite 300	Los Angeles	CA	90020	(213) 365-7400	(213) 927-0017
LA CLINICA DEL PUEBLO, INC.	Douglas Williams	1547 North Avalon Boulevard	Wilmington	CA	90744	(310) 830-0100	(310) 830-0187
LABORATORY CORPORATION OF AMERICA	Pamela Edwards	500 Perimeter Park Drive, Suite C	Morrisville	CA	27560	(919) 481-5276	(919) 481-5404
LITTLE HOUSE	Deborah Neese	9718 Harvard Street	Bellflower	CA	90706	(562) 925-2777	(562) 925-7572
LIVE AGAIN RECOVERY HOME, INC.	Juan Higuera	P.O. Box 680	Lake Hughes	CA	93532	(661) 270-0025	(661) 270-1320
LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE	Brenda Wiewel	11015 Bloomfield Ave	Santa Fe Springs	CA	90670- 3205	(562) 906-2676	(562) 906-2681
LOS ANGELES GAY AND LESBIAN COMMUNITY SERVICE CENTER	Lorri L. Jean	1625 North Schrader Boulevard	Hollywood	CA	90028	(323) 993-7609	(323) 308-4002
LOS ANGELES YOUTH NETWORK	Matt Kamin	1754 Taft Avenue	Los Angeles	CA	90028- 5705	(323) 467-8466	(323) 464-4357
MARY LIND RECOVERY CENTERS	Ed Woodhull	2500 Wilshire Boulevard, Suite 826	Los Angeles	CA	90057	(213) 382-4241	(213) 382-0136
MELA COUNSELING SERVICES CENTER, INC.	Cynthia Diaz	5723 Whittier Boulevard	Los Angeles	CA	90022	(323) 728-0100	(323) 728-9218
MID VALLEY RECOVERY SERVICES, INC.	Robert Shear	3430 Cogswell Road	El Monte	CA	91732	(626) 453-3417	(626) 453-3422
MINI TWELVE STEP HOUSE, INC.	Bobbi A. Owens	5132 South San Pedro Street	Los Angeles	CA	90011	(323) 813-0200	(323) 813-0207
MJB TRANSITIONAL RECOVERY, INC.	Darrell Nelms	11152 South Main Street	Los Angeles	CA	90061	(323) 777-2491	(323) 777-0426
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE - LONG BEACH AREA	Rod Williams	780 Atlantic Avenue	Long Beach	CA	90813	(562) 426-8262	(562) 624-8857
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMONA VALLEYS, INC.	Cheryl Ruedi	4626 North Grand Avenue	Covina	CA	91724- 2052	(626) 331-5316	(626) 332-2219
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY, INC.	Dean Gautschy	6640 Van Nuys Boulevard, Suite C	Van Nuys	CA	91405- 4617	(818) 997-0414	(818) 997-0851
NEW DIRECTIONS FOR YOUTH, INC.	Monica Austin-Jackson	n 7400 Van Nuys Boulevard, #203	Van Nuys	CA	91405	(818) 375-1000	(818) 787-4389
NEW WAY FOUNDATION, INC.	Ira M. Land	844 North Hollywood Way	Burbank	CA	91505	(818) 845-2702	(818) 848-0130
NORTHEAST VALLEY HEALTH CORPORATION	Kimberly Wyard	1172 North Maclay Avenue	San Fernando	CA	91340	(818) 898-1388	(818) 365-7670
PACIFIC CLINICS	Susan Mandel, Ph.D.	800 South Santa Anita Avenue	Arcadia	CA	91006- 3555	(626) 254-5000	(626) 294-1077
PALM HOUSE, INC.	Renato D. Casaclang	2515 East Jefferson Street	Carson	CA	90810	(310) 830-7803	(310) 830-6606

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PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA	Virgie P. Walker	1221 South Western Avenue	Los Angeles	CA	90006	(323) 735-1231	(323) 735-7059
PEOPLE IN PROGRESS, INC.	Dennis O'Sullivan	672 South Lafayette Park Place, Suite 16	Los Angeles	CA	90057- 3224	(213) 384-6689	(213) 384-7279
PHOENIX HOUSES OF LOS ANGELES, INC.	Winifred B. Wechsler	11600 Eldridge Avenue	Lake View Terrace	CA	91342	(818) 686-3011	(818) 896-4859
PLAZA COMMUNITY CENTER	Gabriel Buelna	4018 City Terrace Drive	Los Angeles	CA	90063	(323) 267-9749	(323) 267-0375
POMONA COMMUNITY CRISIS CENTER, INC.	Michelle Vaughn	240 East Monterey Avenue	Pomona	CA	91767	(909) 623-1588	(909) 629-2470
PRINCIPLES, INC.	James Stillwell	1680 North Fair Oaks Ave	Pasadena	CA	91103	(323) 681-2575	(626)798-6970
PROTOTYPES	Cassandra Loch, LCSW, MBA	5601 West Slauson Avenue, Suite 200	Culver City	CA	90230	(310) 641-7795	(310) 649-3096
PUEBLO Y SALUD, INC.	Ruben Rodriguez	1024 North Maclay Avenue, Suite M-13	San Fernando	CA	91340	(818) 837-2272	(818) 837-2271
SALVATION ARMY, A CALIFORNIA CORPORATION	Sherry McWhorter	900 West James M. Wood Boulevard	Los Angeles	CA	90015	(213) 553-3215	(213) 627-1440
SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CENTER, INC.	Ian Hunter, Ph.D.	6842 Van Nuys Boulevard, Sixth Floor	Van Nuys	CA	91405	(818) 901-4830	(818) 785-3446
SAN FERNANDO VALLEY PARTNERSHIP, INC.	Albert Melena	1131 Celis Street	San Fernando	CA	91340	(818) 837-7767	(818) 837-9117
SANTA ANITA FAMILY SERVICES	Fred Loya, Ph.D.	605 South Myrtle Avenue	Monrovia	CA	91016	(626) 359-9358	(626) 358-7647
SANTA MONICA BAY AREA DRUG ABUSE COUNCIL	Anthony Smith	100 Market Street, Suite C	Venice	CA	90291	(310) 664-1415	(310) 664-1417
SEARCH TO INVOLVE PILIPINO AMERICANS	Joel F. Jacinto	3200-A West Temple Street	Los Angeles	CA	90026	(213) 382-1819, ext. 102	(213) 382-7445
SHIELDS FOR FAMILIES, INC.	Kathryn Icenhower, PhD	11601 South Western Ave	Los Angeles	CA	90047	(323) 242-5000	(323) 242-5011
SOCIAL MODEL RECOVERY SYSTEMS, INC.	James L. O'Connell	223 East Rowland Street	Covina	CA	91723	(626) 332-3145	(626) 974-4164
SOLEDAD ENRICHMENT ACTION	Cesar Calderon	222 North Virgil Avenue	Los Angeles	CA	90004	(213) 480-4200	(213) 480-4199
SOUTH BAY ALCOHOLISM SERVICES, DBA NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE OF THE SOUTH BAY	Michael Ballue	1334 Post Avenue	Torrance	CA	90501	(310) 328-1460	(310) 328-1964
SOUTH BAY CHILDREN'S HEALTH CENTER	Christina Harris	410 South Camino Real	Redondo Beach	CA	90277	(310) 316-1212	(310) 316-4411
SOUTH BAY HUMAN SERVICES COALITION	Dolores Lyttle	2370 West Carson Street, #136	Torrance	CA	90501	(310) 328-0780	(310) 328-0175
SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.	Lynne Appel	11500 Paramount Boulevard	Downey	CA	90241	(562) 923-4545	(562) 862-0918

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SPECIAL SERVICE FOR GROUPS	Herbert K. Hatanaka, DSW	605 West Olympic Boulevard, Suite 600	Los Angeles	CA	90015	(213) 553-1800	(213) 553-1822
SPIRITT FAMILY SERVICES, INC.	Irene Redondo- Churchward	13135 Barton Road	Whittier	CA	90605	(562) 903-7000	(562) 903-7677
STEPPING STONES HOME	Jill Schneiter	17727 East Cypress Street	Covina	CA	91722	(626) 967-2677	(626) 858-4923
SUBSTANCE ABUSE FOUNDATION OF LONG BEACH, INC.	Kathryn Romo	1041 Redondo Avenue	Long Beach	CA	90804	(562) 987-5722	(562) 987-4586
SUNRISE COMMUNITY COUNSELING CENTER	Jefferson Sa', D.B.M., Ph.D.	537 South Alvarado Street, 2nd Floor	Los Angeles	CA	90057- 2903	(213) 207-2770	(213) 207-2773
TARZANA TREATMENT CENTER	Albert Senella	18646 Oxnard Street	Tarzana	CA	91356	(818) 654-3815	(818) 996-3051
THE LOS ANGELES FREE CLINIC, DBA: THE SABAN FREE CLINIC	Jeffrey Bujer	8405 Beverly Boulevard	Los Angeles	CA	90048	(323) 330-1650	(323) 651-5026
THE REGENTS OF THE UNIVERSITY OF CALIFORNIA, LOS ANGELES	Martha Hansen	11000 Kinross Avenue, Room 102	Los Angeles	CA	90095	(310) 794-0236	(310) 794-0631
TWIN PALMS RECOVERY CENTER	Truth Moulton	218 North Glendora Avenue	City Of Industry	CA	91744	(626) 968-8875	(626) 968-4565
UNITED AMERICAN INDIAN INVOLVEMENT, INC.	David Rambeau	1125 West 6th Street, Suite 103	Los Angeles	CA	90017	(213) 202-3970	(213) 202-3977
URDC HUMAN SERVICES CORPORATION	Al Sorkin, Ph.D.	1460 North Lake Avenue, Suite 107	Pasadena	CA	91104	(626) 398-3796	(626) 398-3895
VALLEY WOMEN'S CENTER, INC.	Lulu A. Kamatoy	22110 Roscoe Boulevard, Suite 204	Canoga Park	CA	91304	(818) 713-8700	(818) 713-8585
VERDUGO MENTAL HEALTH CENTER	Jeff Smith, Psy.D., MBA	1540 Colorado Street	Glendale	CA	91205	(818) 244-7257	(818) 409-0819
VOLUNTEERS OF AMERICA OF LOS ANGELES	Robert Pratt	3600 Wilshire Boulevard, #1500	Los Angeles	CA	90010	(213) 389-1500	(213) 358-7599
WATTS HEALTHCARE CORPORATION	William D. Hobson, Jr	. 10300 South Compton Avenue, Suite 302	2 Los Angeles	CA	90002	(323) 564-4331	(323) 563-6398